2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2009
Secretary of State

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Entity Name: JUDAH TRIBE MINISTRIES INC.

Current Principal Place of Business:

13756 VICTORIA LAKES DRIVE
JACKSONVILLE, FL 32226 US

New Principal Place of Business:

1559 CESERY BLVD.
JACKSONVILLE, FL 32211 US

Current Mailing Address:

13756 VICTORIA LAKES DRIVE
JACKSONVILLE, FL 32226 US

New Mailing Address:

FEI Number: 35-2208950 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CASTILLEJA, VICTOR G
13756 VICTORIA LAKES DRIVE
JACKSONVILLE, FL 32226 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: CASTILLEJA, VICTOR G
Address: 13756 VICTORIA LAKES DRIVE
City-St-Zip: JACKSONVILLE, FL 32226 US

Title: VP ( ) Delete
Name: NETZ, FREDERICK T JR.
Address: 4015 RENDALE DRIVE
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: TREA ( ) Delete
Name: CASTILLEJA, NANCY D
Address: 13756 VICTORIA LAKES DRIVE
City-St-Zip: JACKSONVILLE, FL 32097 US

Title: SEC ( ) Delete
Name: NETZ, MARY R
Address: 4015 RENDALE DRIVE
City-St-Zip: JACKSONVILLE, FL 32210 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change ( ) Addition
Name: THOMAS, BEST H JR.
Address: 14630 TIKI LANE
City-St-Zip: JACKSONVILLE, FL 32226 US

Title: SEC (X) Change ( ) Addition
Name: CASTILLEJA, NANCY D
Address: 13756 VICTORIA LAKES DRIVE
City-St-Zip: JACKSONVILLE, FL 32097 US

Title: TREA (X) Change ( ) Addition
Name: KASSER, KEVIN L
Address: 85102 ST. THOMAS
City-St-Zip: YULEE, FL 32097 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VICTOR CASTILLEJA P 04/10/2009

Electronic Signature of Signing Officer or Director — Date