

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000026

FILED  
May 02, 2009  
Secretary of State

Entity Name: P & M JACKSON MINISTRIES, INC.

**Current Principal Place of Business:**

333 NAVY BLVD.  
WARRINGTON, FL 32507

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 4505  
WARRINGTON, FL 32507

**New Mailing Address:**

FEI Number: 86-1090295      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

JACKSON, MARIE  
333 NAVY BLVD.  
WARRINGTON, FL 32507      US

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: PT ( ) Delete  
Name: JACKSON, PRENECKER  
Address: 109 LAKEWOOD RD.  
City-St-Zip: PENSACOLA, FL 32507

Title: PT ( ) Delete  
Name: JACKSON, MARIE  
Address: 109 LAKEWOOD RD.  
City-St-Zip: PENSACOLA, FL 32507

Title: STT ( ) Delete  
Name: ELLIOT, ROSE  
Address: 6276 1/2 FERGUSON DR.  
City-St-Zip: PENSACOLA, FL 32503

Title: T ( ) Delete  
Name: REESE, LILLIE  
Address: 1556 MACKLIN PL  
City-St-Zip: PENSACOLA, FL 32534

Title: T (X) Delete  
Name: SMITH, GERALDINE  
Address: 7333 PINE FOREST RD LOT 168  
City-St-Zip: PENSACOLA, FL 32534

Title: T (X) Delete  
Name: SMITH, NORMAN G  
Address: 7333 PINE FOREST ROAD, LOT 168  
City-St-Zip: PENSACOLA, FL 32526

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VPT (X) Change ( ) Addition  
Name: JACKSON, MARIE  
Address: 109 LAKEWOOD RD.  
City-St-Zip: PENSACOLA, FL 32507

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

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

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

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

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: MARIE JACKSON

VPT

05/02/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date