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FILED Secretary of State

Jul 23, 1999 8:00 am MINUME OUR OR SELECT ONLY BUT THE INTER THE PARTY NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Katherine Harris ANNUAL REPORT Secretary of State 07-23-1999 90009 017 ****61.25 DIVISION OF CORPORATIONS 1999 N95000002503 \ DOCUMENT # FAMILIES FOR JESUSCHRIST A.G. INC. .dama kanır Sanar Billi ettik (IS) (IS) 6054915-90008-38 Principal Place of Business Malling Address 1324 KINGSLEY AVENUE JACKSONVILLE FI 1324 KINGSLEY AVENUE JACKSONVILLE FL 32013 3. Date Incorporated or Qualifed 2a. Malling Address 2. Principal Place of Business 05/26/1995 26 21 Applied For FEI Number Suite, Apt. #. etc. Suite, Apt. #, etc. 59-3169809 Not Applicable 27 22 \$8.75 Additional City & State City & State 5. Certificate of Status Desired Fee Required 28 23 \$5.00 May Be Country Country 6. Election Campaign Financing Z'n \Box Trust Fund Contribution Added to Fees 30 24 3207 25 29 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent JORDAN, MARTHA R REV. 7447 IMPALA LANE JACKSONVILLE FL 32244 85 Zip Code 73 corporation submits this statement for the purpose of changing its registionation's board of directors. I hereby accept the appointment as recistant Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the abo office or registered agent, or both, in the State of Florida. Such change was authorized be agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statute. SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13 12. Addition 7**5**0 Change searcta ay DELETE ΠLE Vaneessa OHAZO 1.2 NAME JORDAN, MARTHA R NAME ubi rosen she than st. 1.3 STREET ADDRESS C/O 1324 KINGSLEY AVENUE STREET ADDRESS 32013 JACKSONVILLE FL 1.4 CITY-ST-ZIP CTTY-ST-ZIP DELETE Addition ☐ Change 21 TILE πLE 22 NAME RODRIGUEZ, ELBA NAME 2.3 STREET ADDRESS C/O 1324 KINGSLEY AVENUE STREET ADDRESS JACKSONVILLE FL 2.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 3.1 TMLE TID F m COLLAZO, VANESSA 3.2 NAME NAME 3.3 STREET ADDRESS C/O 1324 KINGSLEY AVENUE STREET ADDRES 3.4. CITY-ST-ZP JACKSONVILLE FL CITY-ST-ZIP Addition ☐ Change --- DELETE 4.1-TITLE TILE' 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRE 4.4 CITY-ST-ZIP CITY-ST-ZP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change 61 TITLE □ DELETE TITLE R 2 NAME NAME 8.3 STREET ADORESS STREET ADDRESS

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

64 CITY-ST-ZIP

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	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR	Date	Dayama Phone P
·	Noncossa Collego	8-9-99	904-272-515
	10010		272-5643