2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004498

Entity Name: JESUS CARES MINISTRY, INC.

Current Principal Place of Business:

9317 HIGHPOINT BLVD. BROOKSVILLE, FL 34613

Current Mailing Address:

P.O.BOX 10768

BROOKSVILLE, FL 34603

FEI Number: 51-0480558 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEON, MAYRA DIRECTOR 9317 HIGHPOINT BLVD BROOKSVILLE, FL 34613 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: MAYRA LEON 02/05/2024

Electronic Signature of Registered Agent

Date

FILED Feb 05, 2024

Secretary of State

0278270087CC

Officer/Director Detail:

TitleDIRECTOR FOUNDERTitleDIRECTOR, PASTORNameLEON, MAYRA MINISTERNameORTIZ, JEREMY SR.AddressP.O.BOX 10768AddressP.O.BOX 10768

City-State-Zip: BROOKSVILLE FL 34603 City-State-Zip: BROOKSVILLE FL 34603

TitleASSISTANT DIRECTORTitleTREASURERNameLEON, JAZLYNameLEON, JOYAddressP.O.BOX 10768AddressP.O.BOX 10768

City-State-Zip: BROOKSVILLE FL 34603 City-State-Zip: BROOKSVILLE FL 34603

TitleSECRETARYTitleASST. PASTORNameLEON, JIRAHNameORTIZ, SOLEDAD A.AddressP.O.BOX 10768AddressP.O.BOX 10768

City-State-Zip: BROOKSVILLE FL 34603 City-State-Zip: BROOKSVILLE FL 34603

I hereby 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 all other like empowered.

SIGNATURE: MAYRA LEON DIRECTOR 02/05/2024