

**2021 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F17000003429

**FILED**  
**Jan 19, 2021**  
**Secretary of State**  
**1113642962CC**

**Entity Name:** GOOD NEWS JAIL & PRISON MINISTRY, A VIRGINIA NONSTOCK CORPORATION

**Current Principal Place of Business:**

2828 EMERYWOOD PKWY  
HENRICO, VA 23294

**Current Mailing Address:**

PO BOX 9760  
HENRICO, VA 23228-0760 US

**FEI Number: 54-0703077**

**Certificate of Status Desired: Yes**

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

NIENHUIS, JON W  
2924 JASMINE ST  
TITUSVILLE, FL 32796 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

**Officer/Director Detail :**

Title DIR/PREGNJPM/O  
Name EVANS, JON MR.  
Address 1459 JORDAN AVE  
City-State-Zip: CROFTON MD 21114

Title DIR/TREBRD/O  
Name GILLESPIE, STEVE MR.  
Address 2456 SMITH HARBOUR DR  
City-State-Zip: DENVER NC 28037

Title DIR/BMBR  
Name GREENE, HARRY MR.  
Address 3713 CUSTIS RD  
City-State-Zip: RICHMOND VA 23225-1101

Title DIRECTOR  
Name OTTO, BRUCE MR.  
Address 6181 CHALLEDON CIR  
City-State-Zip: MT. AIRY MD 21771

Title DIR/CBRD  
Name PATTERSON, DON MR.  
Address 2886 HIBBARD ST  
City-State-Zip: OAKTON VA 22124

Title DIR/BRDMBR, VC  
Name SWANSON, KAREN DR.  
Address 723 HILLVIEW AVE  
City-State-Zip: WEST CHICAGO IL 60185

Title O/VP OF INT. MIN  
Name FRANZ, GARY MR.  
Address 1067 WILLOW CREEK RD  
City-State-Zip: WEST CHICAGO IL 60185

Title DIRECTOR, BOARD MEMBER,  
SECRETARY  
Name FULLER, BERNARD DR.  
Address 11010 FORESTGATE PLC  
City-State-Zip: GLENN DALE MD 20769

**Continues on page 2**

*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: JON EVANS**

**PRESIDENT**

**01/19/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIR/BMBR  
Name LONG, WOODROW W MR  
Address 7880 ROLLING WOODS CT, #203  
City-State-Zip: SPRINGFIELD VA 22152

Title DIRECTOR  
Name CAMPBELL, CRAIG MR.  
Address 81 REFLECTION DR  
City-State-Zip: SANDWICH MA 02563

Title DIRECTOR  
Name WHEELER, ROB MR.  
Address 48 SEANS CIRCLE  
City-State-Zip: CENTERVILLE MA 02632