

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727912

FILED  
Mar 31, 2009  
Secretary of State

Entity Name: S.D. JAMES EVANGELISTIC ASSOCIATION, INC.

**Current Principal Place of Business:**

615 SE 25TH STREET USA  
GAINESVILLE, FL 32601

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1241  
GAINESVILLE, FL 32602

**New Mailing Address:**

FEI Number: 59-1642683

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

TENAH, KWAKU A D  
3608 NW 22ND PLACE  
GAINESVILLE, FL 32605 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: JAMES, SAMUEL D  
Address: 615 SE 25TH STREET USA  
City-St-Zip: GAINESVILLE, FL 32601

Title: V ( ) Delete  
Name: TENAH, KWAKU A  
Address: 3608 N W 22ND PLACE  
City-St-Zip: GAINESVILLE, FL 32605

Title: D ( ) Delete  
Name: EADY, DOROTHY J  
Address: 3401 WELLS ST.  
City-St-Zip: ORLANDO, FL 32805

Title: D ( ) Delete  
Name: SMITH, TERRY L  
Address: 7237 CROOKED LAKE TRAIL  
City-St-Zip: ORLANDO, FL 32818

Title: D ( ) Delete  
Name: SMITH, JESSIE MAE  
Address: 3608 NW 22ND PLACE  
City-St-Zip: GAINESVILLE, FL 32605

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

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:

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: KWAKU A. TENAH

D

03/31/2009

Electronic Signature of Signing Officer or Director

Date