## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#733816** 

FILED Mar 04, 2008 Secretary of State

Entity Name: JOY FELLOWSHIP MINISTRIES, INCORPORATED

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
	BETHEL ROAI EW, FL 32536	כ			
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
	BETHEL ROAI EW, FL 32536	ס			
El Number	r: 59-2327138	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
5912 OAK	STANLEY F. (HILL RD EW, FL 32536	US			
	e named entity s e of Florida.	submits this statement for the	purpose of changing its register	red office or registered agent, or both	
SIGNATU	RE:				
	Electron	ic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	
Fitle: Name: Address: City-St-Zip:	STD () JORDAN, STAN 5912 OAKHILL CRESTVIEW, F	ROAD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Fitle: Name: Nddress: Dity-St-Zip:	D () HOOD, RICHAR 126 KIPLING DI CRESTVIEW, F	RIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Jity-St-Zip.		Delete	Title:	() Change () Addition	
itle: lame: lddress:	PD () WALTERS, HAR 309 TRINIDAD ( CRESTVIEW, F	COURT	Name: Address: City-St-Zip:	( ) onlings ( ) / duliden	
Title: Address: Dity-St-Zip: Title: Name: Address: Dity-St-Zip: Title: Name: Address: Dity-St-Zip:	WALTERS, HAR 309 TRINIDAD ( CRESTVIEW, F	ROLD D COURT L 32536 Delete N R MILL RD	Name: Address:	( ) Change ( ) Addition	
itle: lame: .ddress: bity-St-Zip: itle: lame: .ddress:	WALTERS, HAF 309 TRINIDAD ( CRESTVIEW, F D () BRYANT, ROBIN 5181 GRIFFITH HOLT, FL 3256	ROLD D COURT L 32536  Delete N R MILL RD 64  Delete DIE L MILL RD	Name: Address: City-St-Zip: Title: Name: Address:		

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: ROBIN BRYANT D 03/04/2008