


**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 31, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # 765194**  
 1. Entity Name  
**JESUS PEOPLE MINISTRIES, INC.**



Principal Place of Business      Mailing Address  
**4055 NW 183 STREET**      **4055 NW 183 STREET**  
**MIAMI, FL 33055 US**      **MIAMI, FL 33055 US**

**DO NOT WRITE IN THIS SPACE**



03142006 No Chg-NP CR2E037 (11/05)

4. FEI Number **59-2225033** Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
**WILLIAMS, ISAIAH S JR**  
**16206 NW 83 CT**  
**HIALEAH, FL 33016**

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25**  
**Due by May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WILLIAMS, ISAIAH S JR 16206 NW 83 COURT HIALEAH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HARIG, TERRY 3101 SW 32ND AVE HOLLYWOOD, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WILLIAMS, GLORIA Y 16206 NW 83 COURT HIELEAH, FL 33016
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD JOHNSON, DIANNE 18546 NW 22 PL. MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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U00000497395  
 04/13/06-80075-009 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \_\_\_\_\_ Date: **3/28/06** (305) 625-9630  
Signature and typed or printed name of signing officer or director Daytime Phone #