

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 824547

FILED
Jan 14, 2009
Secretary of State

Entity Name: THE JESUS NAME ASSEMBLY OF THE APOSTOLIC FAITH

Current Principal Place of Business:

4456 KENNAL CIRCLE
JACKSONVILLE, FL 32208

New Principal Place of Business:

4456 KENNDLE CIRCLE
JACKSONVILLE, FL 32208

Current Mailing Address:

4456 KENNAL CIRCLE
JACKSONVILLE, FL 32208

New Mailing Address:

4456 KENNDLE CIRCLE
JACKSONVILLE, FL 32208

FEI Number: 59-1316766

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLMES-PATTERSON, RUBY E
9624 GISBORNE DR
JACKSONVILLE, FL 32208 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: PD () Delete
Name: REV. RUBY ETTA HOLME, S-PATTERSON
Address: 9624 GISBORNE DR
City-St-Zip: JACKSONVILLE, FL

Title: VP () Delete
Name: WILLIAMS, EDDIE BISHOP
Address: 629 GOLFAIR DRIVE
City-St-Zip: JACKSONVILLE, FL 32206

Title: S () Delete
Name: WILLIAMS, CHRISTA
Address: 629 GOLFAIR BLVD.
City-St-Zip: JACKSONVILLE, FL 32206

Title: OS () Delete
Name: SMITH, MARCIA
Address: 322 W 11TH STREET
City-St-Zip: JACKSONVILLE, FL 32206

Title: BM () Delete
Name: YOUNG, ALFONZA
Address: 8857 ROSE HILL DR S
City-St-Zip: JACKSONVILLE, FL 32221

Title: T () Delete
Name: YOUNG, GWENDOLYN
Address: 8857 ROSE HILL DR S
City-St-Zip: JACKSONVILLE, FL 32221

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:

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: GWENDOLYN YOUNG

TREA

01/14/2009

Electronic Signature of Signing Officer or Director

Date