2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000005105

FILED Feb 29, 2008 Secretary of State

Entity Name: THE SECT OF THE LORD JESUS CHRIST (ACTS 28:22) INCORPORATED

Current Principal Place of Business: New Principal Place of Business:

40125 MAGNOLIA ST (PH) LADY LAKE, FL 32159

New Mailing Address: Current Mailing Address:

40125 MAGNOLIA ST (PH) LADY LAKE, FL 32159

FEI Number: 23-2226273 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FORTE, ELSIE A 40125 MAGNOLIA STREET LADY LAKE, FL 32159

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete LUKEMAN, DEBORAH LUKEMAN, DEBORAH A Name: Name: RR1 BOX 220 E-E DAUGHERTY RD. Address: 18 LANIER LANE Address:

City-St-Zip: EQUINUNK, PA 18417 City-St-Zip: BAY SHORE, NY 11706

Title: Title: (X) Change () Addition () Delete Name: FORTE, ALFRED E Name: FORTE, ALFRED E Address: **RR3 BOX 2617** Address: RR3 BOX 2617

City-St-Zip: HONESDALE, PA 18431 City-St-Zip: HONESDALE, PA 18431

Title: () Delete Title: S/TT (X) Change () Addition FORTE, ELSIE A FORTE, ELSIE A Name: Name:

40125 MAGNOLIA ST. 40125 MAGNOLIA ST. Address: Address: City-St-Zip: LADY LAKE, FL 32159 City-St-Zip: LADY LAKE, FL 32159

Title: \top (X) Delete Title: () Change () Addition

Name: FARWELL, METH Name: HC66 BOX 89 CREAMTON CORNERS RD. Address: Address: City-St-Zip: PROMPTON, PA 18456 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: ELSIE A. FORTE S/TT 02/29/2008