

FILE NOW: FILING FEE IS \$61.25

FILED
Mar 04, 1999 8:00 am
Secretary of State

03-04-1999 90015 005 ****61.25

0036259

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # F95000003584

1. Corporation Name

JEWS FOR JESUS CORPORATION

158068-90015-5

Principal Place of Business 240 N. ANDREWS AVE FT LAUDERDALE FL 33301	Mailing Address 240 N. ANDREWS AVE FT LAUDERDALE FL 33301
---	---



2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	3. Date Incorporated or Qualified 07/25/1995 4. FEI Number 94-2222464 Applied For Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
---	--	---

9. Name and Address of Current Registered Agent GUILLERMO, KATZ 240 N. ANDREWS AVE FT LAUDERDALE FL 33301	10. Name and Address of New Registered Agent 81 Name SHARON FREEMAN 82 Street Address (P.O. Box Number is Not Acceptable) 240 N. Andrews Ave 83 84 City Ft Lauderdale FL 85 Zip Code 33301
--	---

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Sharon Freeman Chief of Station 1/5/98
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CV <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SPRADLIN, BYRON	1.2 NAME	
STREET ADDRESS	60 HAIGHT ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	SAN FRANCISCO CA 94102	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	REED, RUSS	2.2 NAME	
STREET ADDRESS	60 HAIGHT ST	2.3 STREET ADDRESS	
CITY-ST-ZIP	SAN FRANCISCO CA 94102	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GROUND, VERNON DR	3.2 NAME	
STREET ADDRESS	60 HAIGHT ST	3.3 STREET ADDRESS	
CITY-ST-ZIP	SAN FRANCISCO CA 94102	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAMOS, STEPHEN	4.2 NAME	
STREET ADDRESS	60 HAIGHT ST	4.3 STREET ADDRESS	
CITY-ST-ZIP	SAN FRANCISCO CA 94102	4.4 CITY-ST-ZIP	
TITLE	P <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRICKNER, DAVID	5.2 NAME	
STREET ADDRESS	60 HAIGHT ST	5.3 STREET ADDRESS	
CITY-ST-ZIP	SAN FRANCISCO CA	5.4 CITY-ST-ZIP	
TITLE	ST <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARKHAM, JONATHAN	6.2 NAME	
STREET ADDRESS	60 HAIGHT ST	6.3 STREET ADDRESS	
CITY-ST-ZIP	SAN FRANCISCO CA 94102	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED

1.28.99

415-864-2600

CR2E037 (11/98)