2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2009
Secretary of State

DOCUMENT# F95000003584

Entity Name: JEWS FOR JESUS CORPORATION

Current Principal Place of Business:

4654 N. UNIVERSITY DR.
FT. LAUDERDALE, FL 33351

New Principal Place of Business:

Current Mailing Address:

60 HAIGHT STREET
SAN FRANCISCO, CA 94102

New Mailing Address:

FEI Number: 94-2222464 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SAVITT, GREG
4654 N. UNIVERSITY DR.
FT. LAUDERDALE, FL 33351 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: CV ( ) Delete
Name: SPRADLIN, BYRON
Address: 60 HAIGHT ST
City-St-Zip: SAN FRANCISCO, CA 94102

Title: D ( ) Delete
Name: SOLOMON, LON
Address: 60 HAIGHT ST
City-St-Zip: SAN FRANCISCO, CA 94102

Title: SEC ( ) Delete
Name: WERTHEIM, STEVE
Address: 60 HAIGHT ST
City-St-Zip: SAN FRANCISCO, CA 94102

Title: AS/T ( ) Delete
Name: LIPKOWITZ, DAVE
Address: 60 HAIGHT ST
City-St-Zip: SAN FRANCISCO, CA 94102

Title: P ( ) Delete
Name: BRICKNER, DAVID
Address: 60 HAIGHT ST
City-St-Zip: SAN FRANCISCO, CA

Title: T ( ) Delete
Name: LESTER, WILLIAM
Address: 60 HAIGHT ST
City-St-Zip: SAN FRANCISCO, CA 94102

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: DAVE LIPKOWITZ AS/T 02/24/2009

Electronic Signature of Signing Officer or Director — Date