2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **F95000003584**

1. Entity Name

JEWS FOR JESUS CORPORATION

FILED Feb 07, 2003 8:00 am Secretary of State 02-07-2003 90104 001 ****61.25

Principal Pla	ce of Business	Mailing Address							
6043 KIMBERL N LAUDERDAL	.Y BLVD LE FL 33068-2817	PO BOX 590866 FT LAUDERDALE FL 33359-0866			90020000				
2. Principal	Place of Business	3. Mailing Address FOBOX 590866							
Suite, Apt	# etc. Kimberly Blud #G	Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES					
City & State N Landendale FL		City & State Fig. Laudin	dale f	L	4. FEI Number 94-2222464			Applied For Not Applicable	
^{Zip} 330	AZÜ 83	^{Zip} 33359	Country	[5. Certificate of St.	atus Desired	\$8.75 Ad Fee Require	ditional	
	6. Name and Address of Current	Registered Agent			7. Name and Add	ress of New Regis	stered Agent		
			Name						
MEYER,≈	STAN	Street	Street Address (P.O. Box Number is Not Acceptable)						
6043 KIN	Street Address (F.O. Dox Number is Not Acceptable)								
N LAUDE	ERDALE FL 33068-2817								
į	City	City Zip Code							
							┎┺╎		
	e named entity submits this statement for	the purpose of changing its re	egistered office o	or register	ed agent, or both, in	the State of Florida	t. I am familiar with,	and accept	
me objiga	itions of registered agent.							1	
					2				
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE:	Registered Agent signa	ture required	when reinstating\		DATE		
	The state of the s	(14012.1	riegistoree Agent signe		when remarking/		DAIL		
··•									
FILE NOW: FEE IS \$61.25 9. Election Car Trust Fund 0					\$5.00 May Be Added to Fees Florida Department of State				
	•	must rund oo	nanodaori.	_	Added to rees	Fiorida L	Department of a	state	
10.	OFFICERS AND DIR	ECTORS	11.		L ADDITIONS/CHANGE	ES TO OFFICERS A	AND DIRECTORS IN	I 10	
TITLE	CV	☐ Delete	TITLE				☐ Change	Addition	
NAME	SPRADLIN, BYRON	50.00	NAME				s.ia.igs		
STREET ADDRESS	60 HAIGHT ST		STREET ADDRESS					}	
CITY-ST-ZIP	SAN FRANCISCO CA 94102		CITY-ST-ZIP					İ	
TITLE	D	☐ Delete	TITLE				☐ Change	☐ Addition	
NAME	REED, RUSS		NAME				.,		
STREET ADDRESS	60 HAIGHT ST		STREET ADDRESS				••		
CITY-ST-ZIP	SAN FRANCISCO CA 94102		CITY-ST-ZIP	1	1				
TITLE	D	☐ Delete	TITLE			***	☐ Change	☐ Addition	
NAME	GROUNDS, VERNON DR		NAME						
STREET ADDRESS	60 HAIGHT ST		STREET ADDRESS	ļ					
CITY-ST-ZIP	SAN FRANCISCO CA 94102		CITY-ST-ZIP						
TITLE	D	☐ Delete	TITLE			•	☐ Change	☐ Addition	
NAME	LAMOS, STEPHEN		NAME		•				
STREET ADDRESS	60 HAIGHT ST		STREET ADDRESS						
CITY-ST-ZIP	SAN FRANCISCO CA 94102		CITY-ST-ZIP		•	<u></u>			
TITLE	P	☐ Delete	TITLE	,			☐ Change	☐ Addition	
NAME	BRICKNER, DAVID		NAME	Ι΄	•	.*		}	
STREET ADDRESS CITY-ST-ZIP	60 HAIGHT ST		STREET ADDRESS					1	
	SAN FRANCISCO CA		CITY-ST-ZIP	-					
TITLE	CAO	☐ Delete	TITLE				☐ Change	☐ Addition	
NAME STREET ADDRESS	STONE, DAVID		NAME STREET + DRDESS					}	
CITY-ST-ZIP	60 HAIGHT ST		STREET ADDRESS						
ZITT GIT LIF	SAN FRANCISCO CA 94102		CITY-ST-ZIP						

12. 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 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 impowered.

SIGNATURE: 1