2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2009
Secretary of State

DOCUMENT# F97000002047

Entity Name: ADOPTION TEMPLE OF JESUS CHRIST INC.

Current Principal Place of Business:

509 1/2 TEXAS CT
FT PIERCE, FL 34950

New Principal Place of Business:

Current Mailing Address:

903 NORTH 21ST ST.
FT PIERCE, FL 34950 US

New Mailing Address:

FEI Number: 58-2296549 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

TAYLOR, LEE T
903 NORTH 21ST STREET
FT PIERCE, FL 34950 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: DCP ( ) Delete
Name: TAYLOR, SAMUEL BISHOP
Address: RT 5 BOX 669
City-St-Zip: MANNING, SC 29102

Title: DC ( ) Delete
Name: TAYLOR, HANNAH MAE
Address: RT 5 BOX 669
City-St-Zip: MANNING, SC 29102

Title: DS ( ) Delete
Name: STEVENS, MARCIA
Address: RT 5 BOX 669
City-St-Zip: MANNING, SC 29102

Title: DV ( ) Delete
Name: TAYLOR, LEE T
Address: 903 NORTH 21ST STREET
City-St-Zip: FT PIERCE, FL 34950

Title: T ( ) Delete
Name: TAYLOR, DOROTHY
Address: 903 NORTH 21ST STREET
City-St-Zip: FT PIERCE, FL 34950

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:

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: DOROTHY TAYLOR T 04/26/2009

Electronic Signature of Signing Officer or Director — Date