

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001826

FILED
May 06, 2008
Secretary of State

Entity Name: JOSHUA GENERATION INCORPORATED

Current Principal Place of Business:

536 NORTH WESTMORELAND DRIVE.
ORLANDO, FL 32805

New Principal Place of Business:

23 NORTH ORANGE BLOSSOM TRAIL
SUITE 3
ORLANDO, FL 32805

Current Mailing Address:

P.O. BOX 609055
ORLANDO, FL 32860

New Mailing Address:

FEI Number: 59-3636993 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

OWENS, JERRY D
3705 CONNOR AVENUE
ORLANDO, FL 32808 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: P () Delete
Name: OWENS, JERRY D
Address: 3705 CONNOR AVENUE
City-St-Zip: ORLANDO, FL 32808

Title: S () Delete
Name: ALLEN, TANYA
Address: 430 ALSTON DRIVE
City-St-Zip: ORLANDO, FL 32835

Title: TR () Delete
Name: OWENS, JERRY
Address: 4527 MOIRA STREET
City-St-Zip: ORLANDO, FL 32811

Title: TR () Delete
Name: GORDON, GREGORY
Address: 1743 E. JACKSON STREET
City-St-Zip: ORLANDO, FL 32801

Title: TR () Delete
Name: SMALLS, ALFREDIA
Address: 7427 BEACON HILL LOOP
City-St-Zip: ORLANDO, FL 32818 US

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: JERRY D. OWENS

P

05/06/2008

Electronic Signature of Signing Officer or Director

Date