2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2007
Secretary of State

DOCUMENT# N02000000510

Entity Name: MIKE JOHNSON INTERNATIONAL MINISTRIES, INC.

Current Principal Place of Business:

5900 TOWNSEND RD., #116
JACKSONVILLE, FL 32244

New Principal Place of Business:

Current Mailing Address:

5900 TOWNSEND RD., #116
JACKSONVILLE, FL 32244

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:

JOHNSON, MICHAEL W
5900 TOWNSEND RD., #116
JACKSONVILLE, FL 32244 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: PD ( ) Delete
Name: JOHNSON, MICHAEL W
Address: 5900 TOWNSEND RD., #116
City-St-Zip: JACKSONVILLE, FL 32244

Title: VD ( ) Delete
Name: JOHNSON, JENNIFER
Address: 5900 TOWNSEND RD., #116
City-St-Zip: JACKSONVILLE, FL 32244

Title: STD ( ) Delete
Name: SINCLAIR, IRIS
Address: 724 MACKIAW ST.
City-St-Zip: JACKSONVILLE, FL 32254

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change ( ) Addition
Name: JOHNSON, MELISSA
Address: 5900 TOWNSEND RD., #116
City-St-Zip: JACKSONVILLE, FL 32244

Title: STD (X) Change ( ) Addition
Name: SINCLAIR, IRIS
Address: 6342 14TH STREET EAST
City-St-Zip: BRADENTON, FL 34203

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: MICHAEL W. JOHNSON PD 05/03/2007

Electronic Signature of Signing Officer or Director — Date