

# 2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000001151

FILED  
Nov 07, 2005  
Secretary of State

Entity Name: JP EXPRESSION MINISTRIES, INC.

## Current Principal Place of Business:

435 CLARK RD., SUITE 402  
JACKSONVILLE, FL 32218

## New Principal Place of Business:

435 CLARK RD., SUITE 405  
JACKSONVILLE, FL 32218

## Current Mailing Address:

PO BOX 41043  
JACKSONVILLE, FL 32203

## New Mailing Address:

FEI Number: 60-0000741      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:

PARKER-TRICE, JUANITA  
435 CLARK RD., SUITE 402  
JACKSONVILLE, FL 32218      US

## Name and Address of New Registered Agent:

PARKER-TRICE, JUANITA  
435 CLARK RD., SUITE 405  
JACKSONVILLE, FL 32218      US

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: JUANITA PARKER-TRICE

11/07/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MELTON, DOT  
Address: 8024 SOUTHSIDE BLVD #78  
City-St-Zip: JACKSONVILLE, FL 32256

Title: D ( ) Delete  
Name: BODDIE, JAMES  
Address: 2110 BLUE AVE.  
City-St-Zip: JACKSONVILLE, FL 32209

Title: D ( ) Delete  
Name: HERRING, ROBERT E SR.  
Address: 1620 HELENA ST.  
City-St-Zip: JACKSONVILLE, FL 32208

Title: D ( ) Delete  
Name: LEWIS, RANDOLPH B  
Address: PO BOX 11675  
City-St-Zip: SAINT PETERSBURG, FL 33733

Title: D ( ) Delete  
Name: NEWMAN, DERRELL  
Address: 7953 SHIRCLIF DR.  
City-St-Zip: JACKSONVILLE, FL 32210

Title: D ( ) Delete  
Name: NEWMAN, JOHN  
Address: 1743 MILLER ST.  
City-St-Zip: ORANGE PARK, FL 32073

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: MCDUFFIE, KATHY  
Address: 2635 PHLOX STREET  
City-St-Zip: JACKSONVILLE, FL 32209

Title: D (X) Change ( ) Addition  
Name: AUSTIN, CASSANDRA  
Address: 1731 WEST 15TH STREET  
City-St-Zip: JACKSONVILLE, FL 32209

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

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

Title: D (X) Change ( ) Addition  
Name: HARPER, LINDA  
Address: 1615 BOULEVARD  
City-St-Zip: JACKSONVILLE, FL 32206

Title: D (X) Change ( ) Addition  
Name: HARRIS, ALBERT  
Address: 2261 EDISON AVENUE  
City-St-Zip: JACKSONVILLE, FL 32204

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JUANITA PARKER-TRICE

CEO

11/07/2005

Electronic Signature of Signing Officer or Director

Date