## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000002459

Entity Name: TEAM JESUS 2000, INC.

FILED Jan 31, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Frincipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

11472 CLAGETT AVE PORT CHARLOTTE, FL 33981

Current Mailing Address: New Mailing Address:

11472 CLAGETT AVE PORT CHARLOTTE, FL 33981

FEI Number: 02-0615683 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DAVIS, BRENDA S 11472 CLAGETT AVE PORT CHARLOTTE, FL 33981 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:

Fladeric Construct David and American

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 CAMERON, WILLIAM J
 Name:
 CAMERON, WILLIAM J

 Address:
 12070 SURREY AVE
 Address:
 612WALTER SCOTT LANE

 City-St-Zip:
 PORT CHARLOTTE, FL 33981
 City-St-Zip:
 WEST UNION, SC 29696

Title: SD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 DAVIS, BRENDA S
 Name:

 Address:
 11472 CLAGGETT AVE.
 Address:

 City-St-Zip:
 PORT CHARLOTTE, FL 33981
 City-St-Zip:

 $\label{eq:title:$ 

Name:CAMERON, CHARLENEName:CAMERON, CHARLENEAddress:12070 SURREY AVE.Address:612 WALTER SCOTT LANE.City-St-Zip:PORT CHARLOTTE, FL 33981City-St-Zip:WEST UNION, SC 29696

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: CHARLENE CAMERON VTD 01/31/2008