

FROM :

FAX NO. :

FILED
May 31, 2005 8:00 am
Secretary of State

05-02-2005 90482 027 ****70.75

**2005 NOT-FOR-PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # N02000002558 1. Entity Name JESUS CHRIST WORLD MINISTRIES INC			
Principal Place of Business 333 SW 27 AVE FT LAUDERDALE, FL 33312		Mailing Address 333 SW 27 AVE FT LAUDERDALE, FL 33312	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip Country		Zip Country	
6. Name and Address of Current Registered Agent MORRIS, DIONNE 2699 NW 68 TERR SUNRISE, FL 33313		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of, registered agent.			
SIGNATURE _____ Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent's signature required when is retaining)			
Filing Fee is \$61.25 ✓ Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☐ Delete WINT, MEHELIA 3799 NW 79 AVE CORAL SPRINGS, FL 33066	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☐ Delete WHITE, GLORIA 2699 NW 68 TERR SUNRISE, FL 33313	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☐ Delete COOTE, NOEL 2699 NW 68 TERR SUNRISE, FL 33313	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☐ Delete MORRIS, DIONNE 2699 NW 68 TERR SUNRISE, FL 33313	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☐ Delete ERSKINE, BISHOP C 10418 SOUTH NORMAL AVE. CHICAGO, IL 60628	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information included on this report or supplemental report is true and accurate and that my 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 817, Florida Statutes; and I let my name appear in Book 10 or Book 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>Neil Coote</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

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04302005 Chg-NP CR2E037 (10/03)

4. FRI Number
68-0500390Applied For
No: Applicable5. Certificate of Status Requested ☒ \$6.75 Additional Fee Required