

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006530

FILED  
Apr 12, 2010  
Secretary of State

**Entity Name:** NEHEMIAH CHURCH MINISTRY, INC.

**Current Principal Place of Business:**

746 W. LIVINGSTON STREET  
ORLANDO, FL 32805

**New Principal Place of Business:**

746 W. LIVINGSTON STREET  
ORLANDO, FL 32805

**Current Mailing Address:**

NEHEMIAH CHURCH  
2428 BASTINGS AVE.  
ORLANDO, FL 32805

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired (X)**

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

JONES, OLIVER W  
746 W. LIVINGSTON STREET  
ORLANDO, FL 32805    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  
Name: JONES, OLIVER W  
Address: 20745 MAXIM PKWY  
City-St-Zip: ORLANDO, FL 32833

Title: VP  
Name: JONES, ANN  
Address: 20745 MAXIM PKWY  
City-St-Zip: ORLANDO, FL 32833

Title: T  
Name: RASPASS, WILLIAM  
Address: 20249 MAXIM PKWY  
City-St-Zip: ORLANDO, FL 32833

Title: T  
Name: GOLDEN, LEST  
Address: 2149 MONTO CARLO TRAIL  
City-St-Zip: ORLANDO, FL 32805

Title: S  
Name: URBANKS, ALLAN  
Address: 2629 ALBION  
City-St-Zip: ORLANDO, FL 32833

Title: A  
Name: GRAY, ALBERTO  
Address: 2635 ABLION AVE  
City-St-Zip: ORLANDO, FL 32833

I hereby 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 all other like empowered.

SIGNATURE: OLIVER W. JONES

PD

04/12/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date