

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009122

FILED  
May 01, 2007  
Secretary of State

Entity Name: JFJ MINISTRIES, INC.

**Current Principal Place of Business:**

12100 PARK BLVD. #107  
SEMINOLE, FL 33772

**New Principal Place of Business:**

**Current Mailing Address:**

12100 PARK BLVD. #107  
SEMINOLE, FL 33772

**New Mailing Address:**

FEI Number: 81-0584912      FEI Number Applied For ( )      FEI Number Not Applicable ( )      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:**

LANE, CINDY  
12100 PARK BLVD. #107  
SEMINOLE, FL 33772      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: DPT ( ) Delete  
Name: LANE, CINDY  
Address: 12100 PARK BLVD. #107  
City-St-Zip: SEMINOLE, FL 33772

Title: DS ( ) Delete  
Name: SMYZER, ROGER  
Address: 250 SIESTA LANE  
City-St-Zip: LARGO, FL 33770

Title: D ( ) Delete  
Name: COOPER, BRENT  
Address: 8018 PHILAJELIC DRIVE  
City-St-Zip: SPRING HILL, FL 34606

Title: V ( ) Delete  
Name: LANE, ALVIN  
Address: 12100 PARK BLVD #107  
City-St-Zip: SEMINOLE, FL 33772

Title: D ( ) Delete  
Name: READING, PATTI  
Address: 1437 PARILLA CIRCLE  
City-St-Zip: TRINITY, FL 34655

Title: D (X) Delete  
Name: CURRAN, CHRISTINA  
Address: 844 CYPRESS COVE WAY  
City-St-Zip: TARPON SPRINGS, FL 34688

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

Title: DS (X) Change ( ) Addition  
Name: KELLON, GLORIA  
Address: 6308 SWEETWATER DRIVE  
City-St-Zip: LAKELAND, FL 33811

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

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: CINDY LANE

DPT

05/01/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date