

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 06, 2004 8:00 am
Secretary of State

05-06-2004 90162 044 ****70.00

DOCUMENT # N02000009356

1. Entity Name

J.C. MINISTRIES, INC.



Principal Place of Business

7824 WOODPOINTE DR
PENSACOLA FL 32514

Mailing Address

7824 WOODPOINTE DR
PENSACOLA FL 32514

54052757



MOORE

CR2E037 (11/03)

2. Principal Place of Business

3001 Highpointe PL
Suite, Apt. #, etc.

3. Mailing Address

3001 Highpointe PL
Suite, Apt. #, etc.

City & State

Pensacola FL

City & State

Pensacola FL

4. FEI Number

81-0600071

Applied For

Not Applicable

Zip

32505

Country

USA

Zip

32505

Country

USA

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CRENSHAW, JANICE DR
7824 WOODPOINTE DR
PENSACOLA FL 32514

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

(Same) Dr. Janice Crenshaw - JC Ministries 1/31/04

Signature, typed or printed name of registered agent, and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP
D CRENSHAW, JANICE DR 7824 WOODPOINTE DR PENSACOLA FL 32514 ☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP
D CRENSHAW, JOHN BISHOP 7824 WOODPOINTE DR PENSACOLA FL 32514 ☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP
D MOORE, NICHOLE 604 CREAMY COURT PENSACOLA FL 32506 ☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition

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)(i), Florida Statutes. I further certify that the information indicated 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other the empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Janice Crenshaw

1/30/04

850-439-0022

Daytime Phone #