2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009356

Entity Name: J.C. MINISTRIES, INC.

FILED Sep 01, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3001 HIGH POINTE PL 1508 W. LARUA ST. PENSACOLA, FL 32505 PENSACOLA, FL 32501

Current Mailing Address: New Mailing Address:

3001 HIGH POINTE PL P.O. BOX 19053

PENSACOLA, FL 32505 PENSACOLA, FL 32523

FEI Number: 81-0600071 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: Name and Address of New Registered Agent:

CRENSHAW, JANICE DR
3001 HIGHPOINT PL
4041 E. OLIVE RD. #396
PENSACOLA, FL 32505 US
PENSACOLA, FL 32514 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: 09/01/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition
Name: CRENSHAW, JANICE DR
Name: CRENSHAW, JANICE DR

 Address:
 3001 HIGH POINT PLACE
 Address:
 4041 E. OLIVE RD. #396

 City-St-Zip:
 PENSACOLA, FL 32505
 City-St-Zip:
 PENSACOLA, FL 32514

Title: () Delete Title: (X) Change () Addition CRENSHAW, JOHN BISHOP CRENSHAW, JOHN BISHOP Name: Name: Address: 3001 HIGH POINT PLACE Address: 4041 E. OLIVE RD. #396 City-St-Zip: PENSACOLA, FL 32505 City-St-Zip: PENSACOLA, FL 32514

 $\label{eq:title:solution} \mbox{Title:} \qquad \mbox{S} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{D} \qquad \mbox{(X) Change () Addition}$

 Name:
 LEWIS, JEANICE
 Name:
 LEWIS, JEANICE

 Address:
 570 SHILOH
 Address:
 570 SHILOH

City-St-Zip: PENSACOLA, FL 32503 City-St-Zip: PENSACOLA, FL 32503

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: JANICE CRENSHAW P 09/01/2008