

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001113

FILED
Apr 30, 2008
Secretary of State

Entity Name: JESUS IS AWAY MAKER MINISTRY, INC.

Current Principal Place of Business:

405 MCLAUGHLIN STREET
SAINT AUGUSTINE, FL 32084 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 4564
SAINT AUGUSTINE, FL 320854564 US

New Mailing Address:

FEI Number: 74-3072086

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCGLOCKING, ANDREW
405 MCLAUGHLIN STREET
SAINT AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

MCGLOCKING, ANDREW
405 MCLAUGHLIN STREET
SAINT AUGUSTINE, FL 32084 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: ANDREW MCGLOCKING

04/30/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MCGLOCKING, ANDREW
Address: 254 STILLWELL AVE.
City-St-Zip: PALATKA, FL 32177 US

Title: T () Delete
Name: MCGLOCKING, ALICE
Address: 254 STILLWELL AVENUE
City-St-Zip: PALATKA, FL 32177 US

Title: SD () Delete
Name: HINES, LESLIE
Address: 3500 - B - COUNTY ROAD 214
City-St-Zip: SAINT AUGUSTINE, FL 32084 US

Title: CH () Delete
Name: LETTSOME, LILLIE ROSE
Address: 400 MCLAUGHLIN STREET
City-St-Zip: SAINT AUGUSTINE, FL 32084 US

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:

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: ANDREW MCGLOCKING

PD

04/30/2008

Electronic Signature of Signing Officer or Director

Date