2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2007 8:00 am
Secretary of State
02-19-2007 90053 017 ****70.00

DOCUMENT # N03000001148

1. Entity Name
IN THE NAME OF JESUS CHURCH OF CHRIST, INC.

Principal Place of Business	Mailing Address
719 LINDSEY PL LAKE WALES, FL 33853	719 LINDSEY PL LAKE WALES, FL 33853

66004670

02082007 No Chg-NP CR2E037 (4/06)

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4. FEI Number
22-3131176
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	DECOSEY, HARRY J
STREET ADDRESS	719 LINDSEY PL
CITY-ST-ZIP	LAKE WALES, FL 33853
TITLE	VD
NAME	DECOSEY, ROBERT D
STREET ADDRESS	719 LINDSEY PL
CITY-ST-ZIP	LAKE WALES, FL 33853
TITLE	TD
NAME	DECOSEY, DESSIE M
STREET ADDRESS	719 LINDSEY PL
CITY-ST-ZIP	LAKE WALES, FL 33853
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 like empowered.

SIGNATURE: Harry DeCosey 2-9-07 863-676-859
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #