

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 19, 2004 8:00 am
Secretary of State

05-19-2004 90010 043 ****70.00

DOCUMENT # N04000000026

1. Entity Name
P & M JACKSON MINISTRIES, INC.



Principal Place of Business
**333 NAVY BLVD.
WARRINGTON, FL 32507**

Mailing Address
**333 NAVY BLVD.
WARRINGTON, FL 32507**

54054712



2. Principal Place of Business

333 Navy Blvd

3. Mailing Address

P.O. Box 4585

Suite, Apt. #, etc.

Suite, Apt. #, etc.

05042004 Chg-NP CR2E037 (10/03)

City & State

Pensacola, FL

City & State

Pensacola, FL

Zip

32507

Country

Escambia

Zip

32507

Country

Escambia

4. FEI Number

86-1090295

Applied For

Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**JACKSON, MARIE
333 NAVY BLVD.
WARRINGTON, FL 32507**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by September 8, 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
**PT
JACKSON, PRENECKER
109 LAKEWOOD RD.
PENSACOLA, FL 32507** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PT
JACKSON, MARIE
109 LAKEWOOD RD.
PENSACOLA, FL 32507** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**STT
ELLIOT, ROSE
6276 1/2 FERGUSON DR.
PENSACOLA, FL 32503** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
JAMES, ALBERTA M
229 E. BARKER ST.
PENSACOLA, FL 32514** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
REESE, LILLIE
1556 MACKLIN PL
PENSACOLA, FL 32534** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
BULTER, PAUL
204 LAKEWOOD RD.
PENSACOLA, FL 32507** ☒ 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

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition
**T
Butler, Paul
884 Lakewood Rd
Pensacola, FL 32507**

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 like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05-17-04 858-457-0696

Date

Daytime Phone #