

✓ N040000000 352

(Requestor's Name)

(Address)

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04 JAN -5 AM 9:43
STATE
TALLAHASSEE FLORIDA

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

ADDITIONAL COPY REQUIRED

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In Compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be:
JONATHAN ANDERSON MINISTRIES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
BUSINESS ADDRESS MAILING ADDRESS
1929 16TH STREET SOUTH P.O. BOX 531843
ST. PETERSBURG, FL 33705 ST. PETERSBURG, FL 33747

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
THE PURPOSE OF THIS CORPORATION IS TO PROVIDE AN ORGANIZED SYSTEM AND MECHANISM FOR SPREADING THE GOSPEL OF JESUS CHRIST THROUGHOUT THE WORLD. THIS CORPORATION SHALL USE REVIVALS, CRUSADES, PRINT AND BROADCAST MEDIA TO ACCOMPLISH THIS OBJECTIVE.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:
DIRECTORS AND/OR OFFICERS SHALL BE APPOINTED AT THE DISCRETION OF THE PRESIDENT,
JONATHAN M. ANDERSON

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):
PRESIDENT - JONATHAN M. ANDERSON, 1929 16TH STREET SOUTH, SAINT PETERSBURG, FL 33705
SECRETARY - SADIE M. OLIVER, 2311 37TH STREET SOUTH, SAINT PETERSBURG, FL 33711
TREASURER - ERIC BOSTICK, 1723 62ND PLACE SOUTH, SAINT PETERSBURG, FL 33712

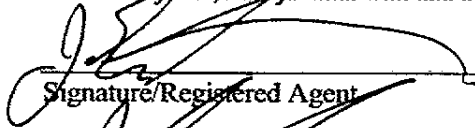
ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the registered agent is:
JONATHAN M. ANDERSON
1929 16TH STREET SOUTH
ST. PETERSBURG, FL 33705

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:
JONATHAN M. ANDERSON
1929 16TH STREET SOUTH
ST. PETERSBURG, FL 33705

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.



Signature/Registered Agent

01/02/2004

Date



Signature/Incorporator

01/02/2004

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA