

ND40000010763

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

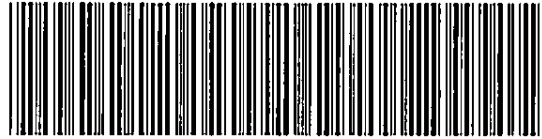
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900432583019

DATE OF FILING: 2024 JUL 10 11:05:42

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

DATE 2024 JUL 10 11:05:42

JUL 24 11:05:42  
S. PRATHER

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** JESUS TEAM MINISTRIES  
Name of Corporation

**DOCUMENT NUMBER:** NO4000010763

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

TREVOR R. WALLACE  
Name of Contact Person

JESUS TEAM MINISTRIES  
Firm/Company

5479 NW 121 AVENUE  
Address

CORAL SPRINGS, FL 33076  
City/State and Zip Code

PASTORTRW@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TREVOR R. WALLACE at ( 954 ) 914-4022  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: JESUS TEAM MINISTRIES
2. The principal office address: 5479 NW 121 AVENUE  
CORAL SPRINGS, FL 33076
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 4-14-2005 Document number: NO4000010763
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

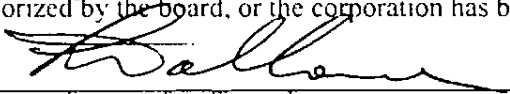
WILLIE J. JONES  
2261 NW 58 STREET  
MIAMI, FL 33142

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

TREVOR R. WALLACE  
5479 NW 121 AVENUE  
P.O. Box NOT acceptable  
CORAL SPRINGS, FL 33076

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

TREVOR WALLACE, PRESIDENT  
Printed or typed name and title

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

  
Signature of Registered Agent

JULY 28, 2024  
Date

If signing on behalf of an entity:

TREVOR WALLACE  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CR2E045 (04/13)