

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000929

FILED  
May 18, 2007  
Secretary of State

Entity Name: DR. DAVID JONES MINISTRIES, INC

## Current Principal Place of Business:

6124 WEATHERWOOD CR.  
WESLEY CHAPEL, FL 33544

## New Principal Place of Business:

## Current Mailing Address:

6124 WEATHERWOOD CR.  
WESLEY CHAPEL, FL 33544

## New Mailing Address:

FEI Number: 20-1957088      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

JONES, DAVID A  
6124 WEATHERWOOD CR  
WESLEY CHAPEL, FL 33544      US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

## OFFICERS AND DIRECTORS:

Title: P      ( ) Delete  
Name: JONES, DAVID A  
Address: 6124 WEATHERWOOD CR  
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: VP      ( ) Delete  
Name: JONES, BEVELYN  
Address: 6124 WEATHERWOOLD CR  
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: D      ( ) Delete  
Name: BUNTING, ED T  
Address: 706 SUNBRIGHT DR  
City-St-Zip: SEFFNER, FL 33584

Title: D      ( ) Delete  
Name: MCAFEE, SHIRLEY A  
Address: 812 FRANKFORD DR.  
City-St-Zip: BRANDON, FL 33511

Title: D      ( ) Delete  
Name: JONES, DAVID P  
Address: 1205 LINEBAUGH ST  
City-St-Zip: TAMPA, FL 33612

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

## 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:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D      ( ) Change (X) Addition  
Name: GRAHAM, LAKESIA  
Address: 16610 SOUTH FINCH  
City-St-Zip: HARVEY, IL 60426

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: ED BUNTING

D

05/18/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date