2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003156

FILED Mar 17, 2006 Secretary of State

Entity Name: JESUS IS THE WAY HEALING CENTER INC.

Current Principal Place of Business: New Principal Place of Business:

5751 BLUEBERRY CT. 800 WEST OAKLAND PARK BLVD. LAUDERHILL, FL 33313 SUITE 303

WILTON MANNERS, FL 33305

Current Mailing Address: New Mailing Address:

P.O. BOX 101472

FT. LAUDERDALE, FL 33310

FEI Number: 52-2456233 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JACKSON, BRIDGET L. JOHNSON, LONNIE B DP 6310 NW 9TH ST. 5751 BLUEBERRY COURT MARGATE, FL 33063 US LAUDERHILL, FL 33313

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: LONNIE B. JOHNSON 03/17/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DP () Delete () Change () Addition JOHNSON, LONNIE B. Name: Name:

5751 BLUEBERRY CT. Address: Address: City-St-Zip: LAUDERHILL, FL 33313 City-St-Zip:

Title: DS () Delete Title: DS (X) Change () Addition

PORTER, KESHA L. Name: PORTER, KESHA L. Name: Address: 7307 SW 8TH CT. Address: 490 PRINCESS DRIVE City-St-Zip: NORTH LAUDERDALE, FL 33068 City-St-Zip: MARGATE, FL 33068

Title: () Delete Title: (X) Change () Addition PATTEN, AGNES JOHNSON, TAWANA R. Name: Name:

5751 BLUEBERRY CT. Address: Address: 651 NW 18TH COURT City-St-Zip: LAUDERHILL, FL 33313 City-St-Zip: POMPANO BEACH, FL 33060

Title: DVP () Delete Title: () Change () Addition

Name: JOHNSON, SUSIE A. Name: Address: 5751 BLUEBERRY CT. Address: City-St-Zip: LAUDERHILL, FL 33313 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: LONNIE B. JOHNSON DP 03/17/2006