

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
May 19, 2007  
Secretary of State

DOCUMENT# N05000005695

Entity Name: JOHN LEWIS MINISTRIES, INC.

**Current Principal Place of Business:**

2185 NE 169TH ST #23  
N MIAMI BEACH, FL 33162

**New Principal Place of Business:**

**Current Mailing Address:**

2185 NE 169TH ST #23  
N MIAMI BEACH, FL 33162

**New Mailing Address:**

FEI Number: 55-0879658      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:**

LEWIS, JOHN  
2185 NE 169TH ST #23  
N MIAMI BEACH, FL 33162      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: LEWIS, JOHN  
Address: 2185 NE 169TH ST., #23  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: VD      ( ) Delete  
Name: LEWIS, PAMELA  
Address: 2185 NE 169TH ST., #23  
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: TD      ( ) Delete  
Name: BRANKER, KIYATA  
Address: 842 NE 209 ST., #106  
City-St-Zip: MIAMI, FL 33179

Title: SD      ( ) Delete  
Name: ASTWORD, OPIA  
Address: 17936 NW 40TH AVE  
City-St-Zip: MIAMI, FL 33055

Title: D      ( ) Delete  
Name: ASTWORD, GEORGE  
Address: 17936 NW 40TH AVE  
City-St-Zip: MIAMI, FL 33055

**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:

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: KIYATA BRANKER

TD

05/19/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date