

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005695

FILED
Apr 29, 2008
Secretary of State

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 ()

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: JOHN LEWIS

P

04/29/2008

Electronic Signature of Signing Officer or Director

Date