

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009022

FILED
Mar 10, 2010
Secretary of State

Entity Name: THE A.C.O.J. NEW SEASON MINISTRIES, INC.

Current Principal Place of Business:

2708 EAST OSBORNE AVE
TAMPA, FL 33610

New Principal Place of Business:

Current Mailing Address:

PO BOX 310 427
TAMPA, FL 33680

New Mailing Address:

PO BOX 310427
TAMPA, FL 33680

FEI Number: 20-3352946

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WASHINGTON, SAMUEL PASTOR
11302 CRESTLAKE VILLAGE DRIVE
RIVERVIEW, FL 33569 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
Name: WASHINGTON, SAMUEL PASTOR
Address: 11302 CRESTLAKE VILLAGE DRIVE
City-St-Zip: RIVERVIEW, FL 33569

Title: S
Name: WASHINGTON, YOLANDA
Address: 11302 CRESTLAKE VILLAGE DRIVE
City-St-Zip: RIVERVIEW, FL 33569

Title: D
Name: DAYS, COLLEEN
Address: 1545 OAK STREET
City-St-Zip: LARGO, FL 33778

Title: D
Name: FELTON, JAMES
Address: 5610 BONITA VISTA WAY, APT. #114
City-St-Zip: TAMPA, FL 33617

Title: D
Name: ELLIS, SHARRI
Address: 5803 BITTER ORANGE AVE
City-St-Zip: TAMPA, FL 33626

I hereby 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 all other like empowered.

SIGNATURE: SAMUEL WASHINGTON

P

03/10/2010

Electronic Signature of Signing Officer or Director

Date