2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2007 8:00 am
Secretary of State
02-16-2007 90035 031 ****70.00

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DOCUMENT # N05000009188

1. Entity Name
NEW JERUSALEM FULL GOSPEL CHURCH, INC.

Principal Place of Business	Mailing Address
4851 SW STATE RD 121 LAKE BUTLER, FL 32054	POB 34 WORTHINGTON SPRINGS, FL 32697

02132007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc	Suite, Apt. #, etc
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3169673 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
DRAKE, ROY 4851 SW STATE RD 121 LAKE BUTLER, FL 32054	Name: Annette Seay Street Address (P.O. Box Number is Not Acceptable): 4895W 111th LAne City: Lake Butler, FL Zip Code: 32054

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Annette Seay
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SEAY, ANNETTE 4851 SW STATE RD 121 LAKE BUTLER, FL 32054	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Rachel Parrett 4851 SW State RD. 121 LAKE Butler, Fla. 32054	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SEAY, FAITH 4851 SW STATE RD 121 LAKE BUTLER, FL 32054	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Roseanna Barnett 4851 SW State RD. 121 LAke Butler, Fla. 32054	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TARBO, ADAM 4851 SW STATE RD 121 LAKE BUTLER, FL 32054	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Roseanna P Barnett 2-13-07 386-496-1461
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #