

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005002

FILED
Jan 08, 2009
Secretary of State

Entity Name: ALL ABOUT JESUS TRUE GOSPEL TEMPLE, CORP.

Current Principal Place of Business:

457 JERI DRIVE
GREEN COVE SPRINGS, FL 32043

New Principal Place of Business:

Current Mailing Address:

457 JERI DRIVE
GREEN COVE SPRINGS, FL 32043

New Mailing Address:

FEI Number: 43-2089920

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COOPER, ROOSEVELT REV.
457 JERI DRIVE
GREEN COVE SPRINGS, FL 32043 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: OP () Delete
Name: COOPER, RUBY PASTOR
Address: 457 JERI DRIVE
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: CP () Delete
Name: COOPER, ROOSEVELT PASTOR
Address: 457 JERI DRIVE
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: D () Delete
Name: TAYLOR, MELDRICK DEACON
Address: 2933 ROAD 16 WEST
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: D () Delete
Name: GALLEGOS, DIAMOND
Address: 4055 PIER STATION ROAD E
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: D () Delete
Name: RIVERS, PEARL
Address: 4055 PIER STATION ROAD E
City-St-Zip: GREEN COVE SPRINGS, FL 32043

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: BURNEY, URIEL
Address: 419 ROBERTS ST S
City-St-Zip: GREEN COVE SPRINGS, FL 32043

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: URIEL BURNEY

D

01/08/2009

Electronic Signature of Signing Officer or Director

Date