2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008
Secretary of State

DOCUMENT# N06000007199

Entity Name: JESUS HOUSE OF LOVE & PEACE MINISTRIES, INC.

Current Principal Place of Business:

613 LEROY AVENUE
LEHIGH ACRES, FL 33972

New Principal Place of Business:

Current Mailing Address:

613 LEROY AVENUE
LEHIGH ACRES, FL 33972

New Mailing Address:

P.O. BOX 1341
LEHIGH ACRES, FL 33970

FEI Number: 20-5237288 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LUGO, WILLIAM
613 LEROY AVENUE
LEHIGH ACRES, FL 33972 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: PD ( ) Delete
Name: LUGO, WILLIAM
Address: 613 LEROY AVENUE
City-St-Zip: LEHIGH ACRES, FL 33972

Title: VPD ( ) Delete
Name: LUGO, AMARILYS
Address: 613 LEROY AVENUE
City-St-Zip: LEHIGH ACRES, FL 33972

Title: T ( ) Delete
Name: STASIAK, KATHLEEN
Address: 105 E 7TH STREET
City-St-Zip: LEHIGH ACRES, FL 33936

Title: S ( ) Delete
Name: STUART, JEFFREY
Address: 713 ZEPHYN AVENUE
City-St-Zip: FORT MYERS, FL 33913

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:

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: WILLIAM LUGO PD 04/14/2008

Electronic Signature of Signing Officer or Director — Date