

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012263

FILED  
Jul 09, 2007  
Secretary of State

**Entity Name:** THE MARVIN AND DEBORAH JACKSON MINISTRIES, INC.

**Current Principal Place of Business:**

44 N COBURN AVENUE  
ORLANDO, FL 32805

**New Principal Place of Business:**

**Current Mailing Address:**

44 N COBURN AVENUE  
ORLANDO, FL 32805

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

ARUGU, ODIATOR  
1990 W FAIRBANKS AVENUE  
WINTER PARK, FL 32789 US

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: D ( ) Delete  
Name: JACKSON, MARVIN A PASTOR  
Address: 44 N COBURN AVENUE  
City-St-Zip: ORLANDO, FL 32805

Title: D ( ) Delete  
Name: JACKSON, DEBORAH A PASTOR  
Address: 44 N COBURN AVENUE  
City-St-Zip: ORLANDO, FL 32805

Title: D ( ) Delete  
Name: ARUGU, ODIATOR  
Address: 1990 W FAIRBANKS AVENUE  
City-St-Zip: WINTER PARK, FL 32789

**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:

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: MARVIN A. JACKSON

D

07/09/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date