2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2009
Secretary of State

DOCUMENT# N06460

Entity Name: WE'RE FOR JESUS, INC.

Current Principal Place of Business:

5000 MAIN ST.
JACKSONVILLE, FL 32206

New Principal Place of Business:

Current Mailing Address:

5000 MAIN ST.
JACKSONVILLE, FL 32206

New Mailing Address:

FEI Number: 59-2021682 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

JONES, ROBERT L
5000 MAIN ST.
JACKSONVILLE, FL 32205 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: JONES, ROBERT L
Address: 5000 N MAIN ST
City-St-Zip: JACKSONVILLE, FL 32206

Title: SD ( ) Delete
Name: BROWN, GLORIA J
Address: 5000 N TAMIAMI ST
City-St-Zip: JACKSONVILLE, FL 32206

Title: TD ( ) Delete
Name: WILLIAMS, YVETTE K
Address: 5000 N MAIN ST
City-St-Zip: JACKSONVILLE, FL

Title: D ( ) Delete
Name: JOHNSON, ELIJAH
Address: 5000 MAIN ST.
City-St-Zip: JACKSONVILLE, FL 32206

Title: D ( ) Delete
Name: JOHNSON, MARGARET
Address: 5000 MAIN ST.
City-St-Zip: JACKSONVILLE, FL 32206

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change ( ) Addition
Name: BROWN, GLORIA J
Address: 5000 N MAIN ST
City-St-Zip: JACKSONVILLE, FL 32206

Title: TD (X) Change ( ) Addition
Name: ROBERTSON, RODERICK R
Address: 5000 N MAIN ST
City-St-Zip: JACKSONVILLE, FL

Title: VP (X) Change ( ) Addition
Name: JOHNSON, ELIJAH E
Address: 5000 MAIN ST.
City-St-Zip: JACKSONVILLE, FL 32206

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: ROBERT L. JONES PD 01/06/2009
Electronic Signature of Signing Officer or Director — Date