

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003274

FILED  
Mar 20, 2012  
Secretary of State

**Entity Name:** FIRST CHOICE MINISTRIES INC.

**Current Principal Place of Business:**

5351 EDGEWATER DR  
ORLANDO, FL 32810

**New Principal Place of Business:**

**Current Mailing Address:**

5351 EDGEWATER DR  
ORLANDO, FL 32810

**New Mailing Address:**

**FEI Number:** 20-8742595

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JONES, LORENZO  
7869 SHELL BARK DR  
ORLANDO, FL 32818 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:** P  
**Name:** JONES, LORENZO  
**Address:** 7869 SHELL BARK DR  
**City-St-Zip:** ORLANDO, FL 32818

**Title:** V  
**Name:** JONES, JANIE  
**Address:** 7869 SHELL BARK DR  
**City-St-Zip:** ORLANDO, FL 32818

**Title:** S  
**Name:** JONES, SUNITIA  
**Address:** 618 KENWICK CIRCLE  
**City-St-Zip:** CASSELBERRY, FL 32792

**Title:** D  
**Name:** JONES, LARHONZA  
**Address:** 12330 CURRY DRIVE  
**City-St-Zip:** SPRING HILL, FL 34608

**Title:** O/DR  
**Name:** LORENZO, JONES  
**Address:** 7869 SHELLBARK. DR.  
**City-St-Zip:** ORLANDO, FL 32818 OR

I hereby 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 all other like empowered.

**SIGNATURE:** LORENZO JONES

P

03/20/2012

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

\_\_\_\_\_  
Date