2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2009
Secretary of State

DOCUMENT# N07000011090

Entity Name: FELLOWSHIP CHURCH OF JESUS MINISTRIES INC.

Current Principal Place of Business:

140 HORTH EAST 18TH STREET
POMPANO BEACH, FL 33060

New Principal Place of Business:

140 NRTH EAST 18TH STREET
POMPANO BEACH, FL 33060

Current Mailing Address:

140 HORTH EAST 18TH STREET
POMPANO BEACH, FL 33060

New Mailing Address:

140 NORTH EAST 18TH STREET
POMPANO BEACH, FL 33060

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

Name and Address of Current Registered Agent:

TAYLOR, BETTY M
10 NORTH WEST 19TH STREET
POMPANO BEACH, FL 33060 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: D ( ) Delete
Name: MOSLEY, BARBARA PASTOR
Address: 140 HORTH EAST 18TH STREET
City-St-Zip: POMPANO BEACH, FL 33060

Title: D ( ) Delete
Name: MOSLEY, WILLIE
Address: 140 HORTH EAST 18TH STREET
City-St-Zip: POMPANO BEACH, FL 33060

Title: S ( ) Delete
Name: TAYLOR, BETTY M
Address: 10 NORTH WEST 19TH STREET
City-St-Zip: POMPANO BEACH, FL 33060

Title: T ( ) Delete
Name: LOUIS, MARY
Address: 1621 NORTH WEST 2ND STREET
City-St-Zip: POMPANO BEACH, FL 33060

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: MOSLEY, BARBARA PASTOR
Address: 140 NORTH EAST 18TH STREET
City-St-Zip: POMPANO BEACH, FL 33060

Title: D (X) Change ( ) Addition
Name: MOSLEY, WILLIE
Address: 140 NORTH EAST 18TH STREET
City-St-Zip: POMPANO BEACH, FL 33060

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: BARBARA MOSLEY D 04/23/2009

Electronic Signature of Signing Officer or Director — Date