

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000011090

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Entity Name:** FELLOWSHIP CHURCH OF JESUS MINISTRIES INC.

**Current Principal Place of Business:**

140 NRTH EAST 18TH STREET  
POMPANO BEACH, FL 33060

**New Principal Place of Business:**

**Current Mailing Address:**

140 NORTH EAST 18TH STREET  
POMPANO BEACH, FL 33060

**New Mailing Address:**

**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: PD  
Name: MOSLEY, BARBARA PASTOR  
Address: 140 NORTH EAST 18TH STREET  
City-St-Zip: POMPANO BEACH, FL 33060

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

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

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

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: BARBARA MOSLEY

PD

04/30/2010

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

\_\_\_\_\_  
Date