

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004044

FILED
Jan 06, 2010
Secretary of State

Entity Name: S.J.F MINISTRIES, INC.

Current Principal Place of Business:

600 SW 8TH STREET
BELLE GLADE, FL 33430 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1096
C/O ST. JOHN 1ST MISSIONARY BAPTIST CHURCH
BELLE GLADE, FL 33430 US

New Mailing Address:

FEI Number: 26-2993018 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILSON, STEVE
609 SW 12TH STREET
BELLE GLADE, FL 33430 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: CH
Name: WILSON, STEVE
Address: P.O. BOX 1096
City-St-Zip: BELLE GLADE, FL 33430 US

Title: V CH
Name: THOMPSON, ANGELA
Address: P.O. BOX 1096
City-St-Zip: BELLE GLADE, FL 33430 US

Title: D
Name: WILSON, HELEN
Address: P.O. BOX 1096
City-St-Zip: BELLE GLADE, FL 33430 US

Title: T
Name: RUMPH, BEATRICE
Address: P.O. BOX
City-St-Zip: BELLE GLADE, FL 33430 US

Title: D
Name: RUTLEDGE, HELEN
Address: P. O BOX 1096
City-St-Zip: BELLE GLADE, FL 33430 US

Title: D
Name: REASE, ROBERT L REV
Address: P.O. BOX 1096
City-St-Zip: BELLE GLADE, FL 33430 US

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: ROBERT REASE

D

01/06/2010

Electronic Signature of Signing Officer or Director

Date