

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007054

FILED
Apr 17, 2009
Secretary of State

Entity Name: JESUS ONLY APOSTOLIC FAITH CHURCH, INC.

Current Principal Place of Business:

424 WEST 41ST STREET
JACKSONVILLE, FL 32206

New Principal Place of Business:

Current Mailing Address:

5536 AGESON RD
JACKSONVILLE, FL 32219

New Mailing Address:

FEI Number: 80-0191060

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DECOSTA, JOHNNIE M
5536 AGESON RD
JACKSONVILLE, FL 32219 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 () Delete
Name: DECOSTA, HOSEA L
Address: 5536 AGESON RD
City-St-Zip: JACKSONVILLE, FL 32219

Title: S () Delete
Name: DECOSTA, JOHNNIE M
Address: 5536 AGESON RD
City-St-Zip: JACKSONVILLE, FL 32219

Title: T () Delete
Name: STEPHENS, MELISSA
Address: 5263 KYLAN DR. N.
City-St-Zip: JACKSONVILLE, FL 32209

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: HOSEA L DECOSTA

P

04/17/2009

Electronic Signature of Signing Officer or Director

Date