

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007387

FILED  
Feb 02, 2010  
Secretary of State

**Entity Name:** OPERATION JABEZ MINISTRIES, INCORPORATED

**Current Principal Place of Business:**

440 W. VOORHIS AVE.  
DELAND, FL 32720

**New Principal Place of Business:**

1104 NE 22ND STREET  
GAINESVILLE, FL 32641

**Current Mailing Address:**

P. O. BOX 1905  
DELAND, FL 32721

**New Mailing Address:**

214 SWEET BEULAH RD.  
PERKINSTONS, MS 39573

**FEI Number:** 35-2290845

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

GILYARD-TOOLEY, JO HANNA E  
440 W. VOORHIS AVE.  
DELAND, FL 32720 US

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

WILLIAMS-LLOYD, GAIL B REV.  
1104 N.E. 22ND STREET  
GAINESVILLE, FL 32641 US

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: GAIL B. WILLIAMS-LLOYD

02/02/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CD  
Name: WOODWARD, JO HANNA E REV.  
Address: 214 SWEET BEULAH  
City-St-Zip: PERKINSON, MS 39573

Title: STD  
Name: THOMAS, MILDRED L  
Address: 513 W. MATHIS AVE.  
City-St-Zip: DELAND, FL 32720

Title: D  
Name: WILLIAMS-LLOYD, GAIL B REV.  
Address: 1104 NE 22ND ST.  
City-St-Zip: GAINESVILLE, FL 32641

Title: D  
Name: DUNCAN, NETTIE  
Address: 250 MT. VERNON PL.  
City-St-Zip: NEWARK, NJ 07016

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: JOHANNA E. WOODWARD

CD

02/02/2010

Electronic Signature of Signing Officer or Director

Date