


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 91022 015 ****61.25

DOCUMENT # N12304 1. Entity Name JORDAN-SHARP MINISTRIES, INC.	
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Principal Place of Business 1403 A 57TH AVE. W. BRADENTON, FL 34207	Mailing Address 189 HILLCREST CR FRANKLIN, NC 28734 US
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44036936



2. Principal Place of Business 5609 20th ST. W. Suite, Apt. #, etc.	3. Mailing Address P.O. Box 11325 Suite, Apt. #, etc.
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04212004 Chg-NP CR2E037 (10/03)

City & State BRADENTON, FL	City & State BRADENTON, FL	4. FEI Number NOT APPLICABLE	Applied For Not Applicable
Zip 34207	Country USA	Zip 34282	Country USA

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent WITT, RONALD 1400 4TH AVE. WEST BRADENTON, FL 34205	7. Name and Address of New Registered Agent Name: WILLIAM NILES Street Address (P.O. Box Number is Not Acceptable): 1417 41st AVE EAST ELLENTON, FL Zip Code 34222
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *William Niles* DATE: 4/22/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: CBSD NAME: JOURDAN, JOHN FREDRICK STREET ADDRESS: 189 HILLCREST CIR CITY-ST-ZIP: FRANKLIN, NC	<input type="checkbox"/> Delete	TITLE: CBSD NAME: JOURDAN, JOHN FREDRICK STREET ADDRESS: 5609 20th ST. W. CITY-ST-ZIP: BRADENTON, FL 34207	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: PD NAME: BERGEON, VINCENT P. STREET ADDRESS: 189 HILLCREST CIR CITY-ST-ZIP: FRANKLIN, NC	<input type="checkbox"/> Delete	TITLE: PD NAME: BERGEON, VINCENT P. STREET ADDRESS: 5609 20th ST. W. CITY-ST-ZIP: BRADENTON, FL 34207	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: TD NAME: BERGEON, RICHARD B. STREET ADDRESS: 189 HILLCREST CIR CITY-ST-ZIP: FRANKLIN, NC	<input type="checkbox"/> Delete	TITLE: TD NAME: BERGEON, RICHARD B. STREET ADDRESS: 5609 20th ST. W. CITY-ST-ZIP: BRADENTON, FL 34207	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *FREDRICK JOHN JOURDAN* *Frederick J. Jourdan* DATE: 4-22-04 DAYTIME PHONE #: 1-941-755-1223
Signature and typed or printed name of signing officer or director