

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17394

FILED
Mar 23, 2009
Secretary of State

Entity Name: JESUS' SERVANTS, INC.

Current Principal Place of Business:

15470 CHLOE CIRCLE
FORT MYERS, FL 33908 US

New Principal Place of Business:

1033 RENNEY FARMS
PENNEY FARMS, FL 32079 US

Current Mailing Address:

P O BOX 151597
ALTAMONTE SPRINGS, FL 32715 US

New Mailing Address:

FEI Number: 59-2772877 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JARRARD, ROLAND
1033 RENNEY FARMS
PENNEY FARMS, FL 32079 US

Name and Address of New Registered Agent:

MCFALLS, MARK
15470 CHLOE CIRCLE
FORT MYERS, FL 33908 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: MARK MCFALLS

03/23/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MCFALLS, BOBBY M
Address: PO BOX 151597
City-St-Zip: ALTAMONTE SPRINGS, FL 32715

Title: VD () Delete
Name: JARRARD, ROLAND
Address: PO BOX 1033
City-St-Zip: PENNEY FARMS, FL 32079

Title: D () Delete
Name: TAYLOR, JAMES A
Address: 592 CULLUM ST
City-St-Zip: MEADVILLE, PA

Title: D () Delete
Name: FENT, SARAH E
Address: 220 CUSHING AVE.
City-St-Zip: DAYTON, OH 45409

Title: D () Delete
Name: WILLIAM, LYNCH M III
Address: PO BOX 940246
City-St-Zip: MAITLAND, FL 32794

Title: D () Delete
Name: BRUCE, WILLIAM H III
Address: 870 CHURCH AVE
City-St-Zip: LONGWOOD, FL 32750

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:

Title: () Change () Addition
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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: BOBBY MCFALLS

P

03/23/2009

Electronic Signature of Signing Officer or Director

Date