2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2009
Secretary of State

DOCUMENT# N34492

Entity Name: JESUS MINISTRIES FAMILY WORSHIP CENTER, INC.

Current Principal Place of Business:

FT. LAUDERDALE HILTON
1870 GRIFFIN ROAD
DANIA BEACH, FL 33004 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 821437
PEMBROKE PINES, FL 33082

New Mailing Address:

FEI Number: 65-0139151 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

TAYLOR, TIMOTHY C SR.
10261 SW 13TH STREET
PEMBROKE PINES, FL 33025 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:	PD	( ) Delete
Name:	TAYLOR, LARRY G SR.	
Address:	752 ST ALBANS DR	
City-St-Zip:	BOCA RATON, FL 33346	
Title:	TD	( ) Delete
Name:	PERKINS, XAVIER SR.	
Address:	16316 COUNTRY CAKE CIRCLE	
City-St-Zip:	DELRAY BEACH, FL 33484	
Title:	CD	( ) Delete
Name:	TAYLOR, TIMOTHY C SR	
Address:	10261 SW 13TH STREET	
City-St-Zip:	PEMBROKE PINES, FL 33025	
Title:	S	( ) Delete
Name:	TAYLOR, KATHY	
Address:	10261 SW 13TH STREET	
City-St-Zip:	PEMBROKE PINES, FL 33025	

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
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: TIMOTHY C. TAYLOR, SR. CD 03/21/2009

Electronic Signature of Signing Officer or Director — Date