2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2007
Secretary of State

DOCUMENT# N93000002587

Entity Name: THE HOLY SPIRIT MINISTRIES OF JACKSONVILLE, FLORIDA, INC.

Current Principal Place of Business:

1157 ROMAINE CIRCLE WEST
JACKSONVILLE, FL 32225

New Principal Place of Business:

1337 W. 23RD STREET
JACKSONVILLE, FL 32209

Current Mailing Address:

1157 ROMAINE CIRCLE WEST
JACKSONVILLE, FL 32225

New Mailing Address:

1337 W. 23RD STREET
JACKSONVILLE, FL 32209

FEI Number: 60-0001756 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JONES, CHARLIE M
1157 ROMAINE CIRCLE WEST
JACKSONVILLE, FL 32225 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: PP ( ) Delete
Name: JONES, CHARLIE M
Address: 1157 ROMAINE CIRCLE WEST
City-St-Zip: JACKSONVILLE, FL 32225

Title: VP ( ) Delete
Name: JONES, MILTON B
Address: 1157 ROMAINE CIRCLE WEST
City-St-Zip: JACKSONVILLE, FL 32225

Title: T ( ) Delete
Name: WILLIAMS, ODESSA S
Address: 2947 RIBAULT CIR
City-St-Zip: JACKSONVILLE, FL 32208

Title: S ( ) Delete
Name: HOWARD, ALLEN E DR
Address: 5816 LUSAID DR
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:

Title: S (X) Change ( ) Addition
Name: KELLER, JANICE
Address: 1751 W. 28TH STREET
City-St-Zip: JACKSONVILLE, FL 32209

I hereby certify that the information supplied with this filing does not qualify for the 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: CHARLIE MAE JONES P 02/20/2007

Electronic Signature of Signing Officer or Director — Date