

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000003249

1. Entity Name

JESUS IS THE WAY MINISTRIES INC.

FILED
May 15, 2000 8:00 am
Secretary of State

05-15-2000 90203 010 ****61.25

Principal Place of Business

Mailing Address

MARRIOT
6650 NORTH ANDREWS AVE
FT. LAUDERDALE FL 33309
US

JESUS IS THE WAY MIN. INC.
PO BOX 938531
MARGATE FL 33093-8531
US

2. Principal Place of Business

JESUS IS THE WAY MIN. INC.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.
3324 WEST BROWARD BLVD.

City & State

City & State
FT. LAUDERDALE FLORIDA

Zip

Zip
33311

Country

Country
BROWARD

Country

4. FEI Number

65-0430727

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JOHNSON, LONNIE B JR.
2660 NW 5 ST
POMPANO BEACH FL 33069

Name SUSIE A. JOHNSON

Street Address (P.O. Box Number is Not Acceptable)

7117 SPORTSMANS DRIVE

City NORTH LAUDERDALE FL Zip Code 33068

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.

SIGNATURE Susie A. Johnson Susie A. Johnson/Director 4-28-00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME JOHNSON, LONNIE B JR.
STREET ADDRESS 2660 NW 5TH ST.
CITY-ST-ZIP POMPANO BCH. FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME JOHNSON, SUSIE A
STREET ADDRESS 2660 NW 5TH ST.
CITY-ST-ZIP POMPANO BCH. FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☐ Delete
NAME PORTER, KESHA L
STREET ADDRESS 2643 NW 8TH ST.
CITY-ST-ZIP POMPANO BCH. FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☐ Delete
NAME JOHNSON, MAMIE L
STREET ADDRESS 651 NW 18 COURT
CITY-ST-ZIP POMPANO BEACH FL 33060

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: Lonnie B. Johnson Jr Lonnie B. Johnson Jr PRESIDENT 4-28-00 954-290-9089
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)