2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 8:00 am
Secretary of State
04-29-2004 90240 011 ****61.25

DOCUMENT # N94000003828

1. Entity Name
JOY FELLOWSHIP, INC.

Y4U72140

Principal Place of Business	Mailing Address
11505 COLONY HILL RD. SEFFNER, FL 33584 US	11505 COLONY HILL RD. SEFFNER, FL 33584 US

01242004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3257951 ☐ 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
O'NEAL, JAY 6324 FLAMINGO DR APOLLO BEACH, FL 33572	Name: O'Neal, Tim Street Address (P.O. Box Number is Not Acceptable): 6324 Flamingo Dr City: Apollo Beach FL Zip Code: 33572

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: Timothy O'Neal Jim O'Neal 04-25-04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~DP~~ O'NEAL, JAY ~~6324 FLAMINGO DR~~ ~~APOLLO BEACH, FL 33572~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D 6507 Manila Palm Way Apollo Beach, FL 33572	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV BUTTIERIES, DAVID 1318 SILLIMAN LN SEFFNER, FL 33584	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DST LEAVITT, STEVEN 4011 EASTRIDGE DR. VALRICO, FL 33594	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~D~~ O'NEAL, TIM ~~11413 CHERRY WOOD LANE~~ ~~RIVERVIEW, FL 33569~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP 6324 Flamingo Dr Apollo Beach, FL 33572	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Charlsie Mapp 925 Benninger Drive Brandon, FL 33510	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ 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: Steven Leavitt Steven Leavitt 04/24/04 727-893-4165
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #