2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400003828

Entity Name: JOY FELLOWSHIP, INC.

FILED Jul 14, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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3101 KINGSWAY RD. SEFFNER, FL 33584 US

Current Mailing Address: New Mailing Address:

PO BOX 3725 1713 KIRTLEY

APOLLO BEACH, FL 33572 US BRANDON, FL 33511 US

FEI Number: 59-3257951 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

O'NEAL, TIM J O'NEAL, LISA 6324 FLAMINGO DR 1713 KIRTLEY DR.

APOLLO BEACH, FL 33572 US BRANDON, FL 33511 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: LISA O'NEAL 07/14/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: DP (X) Change () Addition

 Name:
 O'NEAL, LISA
 Name:
 O'NEAL, LISA

 Address:
 6324 FLAMINGO DR.
 Address:
 1713 KIRTLEY DR.

 City-St-Zip:
 APOLLO BEACH, FL 33572
 City-St-Zip:
 BRANDON, FL 33511

Title: DV (X) Delete Title: () Change () Addition

 Name:
 BUTTIERIES, DAVID
 Name:

 Address:
 1318 SILLIMAN LN
 Address:

 City-St-Zip:
 SEFFNER, FL 33584
 City-St-Zip:

Title: DST (X) Delete Title: () Change () Addition

 Name:
 O'NEAL, MIKE
 Name:

 Address:
 6324 FLAMING DR.
 Address:

 City-St-Zip:
 APOLLO BEACH, FL 33572
 City-St-Zip:

Title: DP (X) Delete Title: () Change () Addition

 Name:
 O'NEAL, TIM
 Name:

 Address:
 6324 FLAMINGO DR
 Address:

 City-St-Zip:
 APOLLO BEACH, FL 33572
 City-St-Zip:

Title: D (X) Delete Title: () Change () Addition

 Name:
 STEINER, DON
 Name:

 Address:
 PO BOX 8756
 Address:

 City-St-Zip:
 LAKELAND, FL 33806
 City-St-Zip:

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: LISA O'NEAL DP 07/14/2006

Electronic Signature of Signing Officer or Director

Date