

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004181

FILED
Apr 25, 2008
Secretary of State

Entity Name: APOSTOLIC ASSEMBLIES OF JESUS CHRIST INC.

Current Principal Place of Business:

1028 EAST 10TH STREET
JACKSONVILLE, FL 32206

New Principal Place of Business:

Current Mailing Address:

1028 E. 10TH ST
JACKSONVILLE, FL 32206

New Mailing Address:

FEI Number: 59-3337469

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRANT, JAMES BISHOP
1140 DURKEE DR N
JACKSONVILLE, FL 32209 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: P () Delete
Name: BRANT, JAMES BISHOP
Address: 1140 DURKEE DR. N
City-St-Zip: JACKSONVILLE, FL 32209

Title: V () Delete
Name: POLITE, ALPHONSO
Address: 1444 W. 21ST STREET
City-St-Zip: JACKSONVILLE, FL 32209

Title: VS () Delete
Name: BRANT, DENISE
Address: 1140 DURKEE DR. N
City-St-Zip: JACKSONVILLE, FL 32209

Title: T () Delete
Name: BRANT, III, JAMES
Address: 1140 DURKEE DRIVE NORTH
City-St-Zip: JACKSONVILLE, FL 32209

Title: T () Delete
Name: NORRIS, SYLVIA
Address: 7730 PICKETT ST
City-St-Zip: JACKSONVILLE, FL 32208

Title: T () Delete
Name: SMITH, CHERYL D
Address: 1938 FLORIDA AVENUE
City-St-Zip: JACKSONVILLE, FL 32206

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:

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: DENISE BRANT

VS

04/25/2008

Electronic Signature of Signing Officer or Director

Date