2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2009
Secretary of State

DOCUMENT# N95000005966

Entity Name: J.O.Y. MINISTRY FOR JESUS, INC.

Current Principal Place of Business:

960 HEARTY STREET
NORTH FORT MYERS, FL 33903

New Principal Place of Business:

Current Mailing Address:

960 HEARTY STREET
NORTH FORT MYERS, FL 33903

New Mailing Address:

FEI Number: 65-0630762 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SPEES, M. LOIS
960 HEARTY STREET
NORTH FORT MYERS, FL 33903 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: VPC ( ) Delete
Name: HINKLE, GARY
Address: POST OFFICE BOX 322
City-St-Zip: SOLDOTNA, AK 99669

Title: D ( ) Delete
Name: DEFFET, THOMAS
Address: 2145 ALDRIDGE AVENUE
City-St-Zip: FT. MYERS, FL 33901

Title: D ( ) Delete
Name: WEBB, MARCIA
Address: 6317 HOFSTRA STREET
City-St-Zip: FORT MYERS, FL 33919

Title: PT ( ) Delete
Name: SPEES, M. LOIS
Address: 960 HEARTY STREET
City-St-Zip: NORTH FORT MYERS, FL

Title: D ( ) Delete
Name: WEBB, STEPHEN
Address: 6317 HOFSTRA CT
City-St-Zip: FT. MYERS, FL 33901

Title: D ( ) Delete
Name: DEZAGO, EDMOND K
Address: 611 SHARON MILL COURT
City-St-Zip: WORTHINGTON, OH 43085

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: PT (X) Change ( ) Addition
Name: SPEES, M. LOIS
Address: 960 HEARTY STREET
City-St-Zip: NORTH FORT MYERS, FL 33903

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: M.LOIS SPEES PT 04/06/2009

Electronic Signature of Signing Officer or Director — Date