2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2009
Secretary of State

DOCUMENT# N96000000255

Entity Name: THE APOSTOLIC CHURCH OF JESUS, INC.

Current Principal Place of Business:

920 CAROLINA AVENUE
AVON PARK, FL 33825

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 668566
POMPANO BEACH, FL 33066

New Mailing Address:

FEI Number: 71-1047268 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WASHINGTON, SAMUEL SR
11302 CRESTLAKE VILLAGE DRIVE
RIVERVEIW, FL 33568 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: SMITH, STANLEY C
Address: 117 EBI STREET
City-St-Zip: AVON PARK, FL 33825

Title: SD ( ) Delete
Name: JENKINS, ALEX
Address: PO BOX 668566
City-St-Zip: POMPNO BEACH, FL 33066

Title: TD ( ) Delete
Name: WASHINGTON, SAMUEL
Address: 11302 CRESTLAKE VILLAGE DRIVE
City-St-Zip: RIVERVEIW, FL

Title: D ( ) Delete
Name: ROLLE, PRESTON SR
Address: 444 FORD STREET
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: D ( ) Delete
Name: HICKS, JIMMIE JR
Address: 4110 NORTH SHORE
City-St-Zip: WEST PALM BEACH, FL 33407

Title: D ( ) Delete
Name: BOLES, DANIEL
Address: 6333 BROOKHILL CIRCLE
City-St-Zip: ORLANDO, FL 32810

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: SAMUEL L WASHINGTON TREA 03/27/2009
Electronic Signature of Signing Officer or Director — Date