



2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 11, 2004 8:00 am
Secretary of State

05-11-2004 90076 012 ****61.25

DOCUMENT # N96000002489					
1. Entity Name THE JESUS JOURNAL, INC.					
Principal Place of Business 1916 LAWSON ROAD TALLAHASSEE, FL 32308			Mailing Address 1916 LAWSON ROAD TALLAHASSEE, FL 32308		
24074388					
					
2. Principal Place of Business 3429 Castlebar Cir.		3. Mailing Address 3429 Castlebar Cir.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Tallahassee FL		City & State Tallahassee FL		4. FEI Number 31-1466664	
Zip 32309		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SAVAGE, MICHAEL E 1916 LAWSON ROAD TALLAHASSEE, FL 32308					
7. Name and Address of New Registered Agent Name: Michael E. Savage Street Address (P.O. Box Number is Not Acceptable): 3429 Castlebar Cir. City: Tallahassee FL Zip Code: 32309					
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: Michael E. Savage <i>Michael E. Savage</i> 5-4-2004 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by September 8, 2004			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE D	NAME SAVAGE, MICHAEL E				
STREET ADDRESS 1916 LAWSON ROAD	CITY-ST-ZIP TALLAHASSEE, FL 32308				
TITLE D	NAME MORREAU, DENNIS				
STREET ADDRESS 9496 LISKA	CITY-ST-ZIP TALLAHASSEE, FL 32311				
TITLE D	NAME SAVAGE, SHAWNICE M				
STREET ADDRESS 1916 LAWSON RD	CITY-ST-ZIP TALLAHASSEE, FL 32308				
TITLE D	NAME SAVAGE, SHAWNICE M				
STREET ADDRESS 1916 LAWSON RD	CITY-ST-ZIP TALLAHASSEE, FL 32308				
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STREET ADDRESS 1916 LAWSON RD	CITY-ST-ZIP TALLAHASSEE, FL 32308				
TITLE D	NAME SAVAGE, SHAWNICE M				
STREET ADDRESS 1916 LAWSON RD	CITY-ST-ZIP TALLAHASSEE, FL 32308				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE D	NAME SAVAGE, MICHAEL E				
STREET ADDRESS 1916 LAWSON ROAD	CITY-ST-ZIP TALLAHASSEE, FL 32308				
TITLE D	NAME MORREAU, DENNIS				
STREET ADDRESS 9496 LISKA	CITY-ST-ZIP TALLAHASSEE, FL 32311				
TITLE D	NAME SAVAGE, SHAWNICE M				
STREET ADDRESS 1916 LAWSON RD	CITY-ST-ZIP TALLAHASSEE, FL 32308				
TITLE D	NAME SAVAGE, SHAWNICE M				
STREET ADDRESS 1916 LAWSON RD	CITY-ST-ZIP TALLAHASSEE, FL 32308				
TITLE D	NAME SAVAGE, SHAWNICE M				
STREET ADDRESS 1916 LAWSON RD	CITY-ST-ZIP TALLAHASSEE, FL 32308				
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: <i>Michael E. Savage</i> Michael E. Savage 5-4-2004 910-3667 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					