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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N96000006081

1. Corporation Name
JESUS PEOPLE FAMILY WORSHIP CENTER CHURCH, INC.

Principal Place of Business 4802 GUNN HWY STE 126 TAMPA FL 33624 US	Mailing Address 4802 GUNN HWY STE 126 TAMPA FL 33624 US
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2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 11/22/1996
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 65-0713778
City & State 23	City & State 28	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
Zip 24	Country 25	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
MITCHELL, ANDRE V 13106 N FLORIDA AVE APT #119 TAMPA FL 33613		81 Name ANDRE V. MITCHELL	85 Zip Code 33624
		82 Street Address (P.O. Box Number is Not Acceptable) 10423 Oakbrook Drive	
		83 City Tampa, FL	
		84 City Tampa FL	

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	MITCHELL, ANDRE' V 3280 NW 51ST STREET MIAMI FL 33142	1.1 TITLE Change <input type="checkbox"/> Addition <input type="checkbox"/>	
TITLE D	MITCHELL, NANCY M 3280 NW 51ST STREET MIAMI FL 33142	2.1 TITLE T	Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/>
TITLE D	WILLIAMS, ISAAH S JR. 16206 NW 83RD COURT MIAMI FL 33016	2.2 NAME Alex Charles	
TITLE DELETED		2.3 STREET ADDRESS 11331 Andy Drive	
TITLE DELETED		2.4 CITY-ST-ZIP Riverview, FL 33569	Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/>
TITLE DELETED		3.1 TITLE T	Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/>
TITLE DELETED		3.2 NAME Federico Gordon	
TITLE DELETED		3.3 STREET ADDRESS 530 Tuscanny Park Loop	
TITLE DELETED		3.4 CITY-ST-ZIP Brandon, FL 33511	
TITLE DELETED		4.1 TITLE Change <input type="checkbox"/> Addition <input type="checkbox"/>	
TITLE DELETED		4.2 NAME	
TITLE DELETED		4.3 STREET ADDRESS	
TITLE DELETED		4.4 CITY-ST-ZIP	
TITLE DELETED		5.1 TITLE Change <input type="checkbox"/> Addition <input type="checkbox"/>	
TITLE DELETED		5.2 NAME	
TITLE DELETED		5.3 STREET ADDRESS	
TITLE DELETED		5.4 CITY-ST-ZIP	
TITLE DELETED		6.1 TITLE Change <input type="checkbox"/> Addition <input type="checkbox"/>	
TITLE DELETED		6.2 NAME	
TITLE DELETED		6.3 STREET ADDRESS	
TITLE DELETED		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANDRE MITCHELL *Andre Mitchell* 4.28.99 813-264-4656
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (11/98)