Mailing Address

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # N9600006081

Principal Place of Business

JESUS PEOPLE FAMILY WORSHIP CENTER CHURCH, INC.

4802 GUNN HWY STE 126 TAMPA FL 33624 US 4802 GUNN HWY STE 126 TAMPA FL 33624 US US									
— ·	lace of Business	2a. Mailing Address				3. Date Incorporated or Qualifed 11/22/1996			
Suite, Apt. #, etc.		Suite Ant # etc	Suite, Apt. #, etc.			I Number	<u> </u>	An	plied For
22		27				-0713778		 	t Applicable
City & Stat	<u>.</u>		City & State					\$8.75	Additional
23	•	28			5. Ce	rtifcate of Status Desired		Fee Re	
Zip				Country		ction Campaign Financing		\$5.00	May Be
24	25 29 30		0			st Fund Contribution		Added	• 1
	9. Name and Address of Curr				10. Na	me and Address of New	Registered A	gent	
			8			· vrmount			Ì
MITCHELL, ANDRE V				ANDRE V. MITCHELL 82 Street Address (P.O. Box Number is Not Acceptable)					
	LORIDA AVE		1042			orook Drive			
APT #119			8	83					
TAMPA FL			<u> </u>		ÇE., 200			les Zin I	Code
IAMAATE	. 00010		8		Tampa		FL	85 Zip (Code 524
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	Signature, typed or printed name of registered	agent and title if applicable. (NOTE: R	egistered Ac	ent signature i	required when reinsta	ating)	DATE		
12.		AND DIRECTORS	13.		ADD	DITIONS/CHANGES TO OF	FICERS AN	DIRECTO	RS IN 12
TITLE	D	☐ DELETE	1.1 TITLE					☐ Change	☐ Addition
NAME	MITCHELL, ANDRE' V		1.2 NAME	•					
STREET ADDRESS	3280 NW 51ST STREET		1.3 STRE	ET ADORESS					j
CITY-ST-ZIP	MIAMI FL 33142		1.4 CITY-	ST-ZIP				•	
TITLE	D	DELETE	2.1 TΠLE		T		•	☐ Change	X[X] Addition
NAME	MITCHELL, NANCY M		2.2 NAM	•	Alox (Charles			
STREET ADDRESS	3280 NW 51ST STREET		2.3 STRE	ET ADORESS	1 "	Andy Drive			
CITY-ST-ZIP	MIAMI FL 33142		2. 4 CITY			view, FL 33	569		
TITLE	D	☐ DELETE	3.1 TITLE		T	VICH!	<u></u>	Change	XX Addition
NAME	WILLIAMS, ISAIAH S JR.	_	3.2 NAM		Feder	ico Gordon	- -		i
STREET ADDRESS	16206 NW 83RD COURT	•	3.3 STRE	ET ADORESS	1	uscanny Park	Loon		
CITY-ST-ZIP	MIAMI FL 33016		3.4. CITY	.ST. 7IP	Brando	on, FL 3351	1		
TITLE	IMAMITE GOOTE	☐ DELETE	4.1 TITLE					Change	☐ Addition
NAME			4. 2 NAM	E	1				
STREET ADDRESS	•		43 STRE	ET ADDRESS					
	_		4.4 CITY			•			
CITY-ST-ZIP		☐ DELETE	5.1 TITLE					Change	Addition
NAME	•		5.2 NAM	•					
STREET ADDRESS			5.3 STRE	ET ADDRESS					
CITY-ST-ZIP			5.4 CITY	ST-ZIP					.
TITLE		☐ DELETE	6.1 TITLE			·		☐ Change	Addition
NAME			6.2 NAM	1				•	,
1 - UTIL	l		I	ET ADDRESS					

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.

6.4 CITY-ST-ZIP

STREET ADDRESS

SIGNATURE: ANDRE SIGNACHERE SIG

813-264-4656

FILED

05-01-1999 90100 043 ****70.00

May 01, 1999 8:00 am g Secretary of State