

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006081

FILED
Feb 14, 2006
Secretary of State

Entity Name: JESUS PEOPLE FAMILY WORSHIP CENTER CHURCH, INC.

Current Principal Place of Business:

4802 GUNN HWY
STE 126
TAMPA, FL 33624 US

New Principal Place of Business:

Current Mailing Address:

4802 GUNN HWY
STE 126
TAMPA, FL 33624 US

New Mailing Address:

FEI Number: 65-0713778 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MITCHELL, ANDRE V
10423 OAKBROOK DRIVE
TAMPA, FL 33624 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: PD () Delete
Name: MITCHELL, ANDRE V
Address: 10423 OAKBROOK DRIVE
City-St-Zip: TAMPA, FL 33624

Title: D () Delete
Name: WILLIAMS, ISAIAH S JR.
Address: 3076 OLD STILL LANE
City-St-Zip: WESTON, FL 33331

Title: T () Delete
Name: GORDON, FEDERICO
Address: 530 TUSCANNY PARK LOOP
City-St-Zip: BRANDON, FL 33511

Title: T () Delete
Name: BROWN, KAREN
Address: 10802 WEST HILLSBOROUGH AVE., #304
City-St-Zip: TAMPA, FL 33615

Title: T () Delete
Name: TORRANCE, ARTHUR
Address: 10503 OUT ISLAND DR.
City-St-Zip: TAMPA, FL 33615

Title: T () Delete
Name: THOMAS, CHARLIE
Address: 5507 NORTH SEMINOLE AVENUE
City-St-Zip: TAMPA, FL 33604

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: KNOWLES, LACHAN
Address: 3412 JAMAIS WOOD WAY
City-St-Zip: TAMPA, FL 33618

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: THOMAS, CHARLIE
Address: 8725 TWIN LAKES BOULEVARD
City-St-Zip: TAMPA, FL 33614

I hereby certify that the information supplied with this filing does not qualify for the 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: ANDRE V. MITCHELL

PD

02/14/2006

Electronic Signature of Signing Officer or Director

_____ Date