2005 NO 1-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)

SIGNATURE: 1 Origin

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 15, 2005 08:00 AM Secretary of State	DOCUMENT # (IOTOGOOGLASE								·	TILED ·		
Principal Place of Business Mailing Address Principal Place of Business Principal Place of												
### PACKET NOT CHART A HOOCHEE FL 32324 #### PACKET NOT CHART NOT	NEW JERUSALEM MISSIONARY BAPTIST CHURCH, INC.							y	Secre	tary of St	ate	
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Fig. 1. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Agent At 5 WEST RIVER ROAD CHATTAHOOCHEE FL 32324 2. 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 and the Terrical by GOTE highwest Agent are submit and accept the obligations of registered agent. FLE NOW: FEE IS \$61.25 Due By May 1, 2005 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE MANUEL, GENEVA TO NAME AND DIRECTORS IN 10 THE MANUEL, GENEVA TO NAME DAVIS, LORINE TO AVIS, LORINE DAVIS, LORINE TO AVIS, LORINE DAVIS, LORING DAVIS, LORING DAVIS, L	City & State				·	·	<u> </u>	4. FEI Number	59-3148065		Not Applicable	
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12. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes further certify that the information	12 I hereby	certify that the in	nformation supplied wit	th this filing	does not qualify for	or the exe	motion stated in	Section 119.07(3)(i).	Florida Statutes	further certify that the	ne 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.	indicated of the cor	i on this report o rporation or the	r supplemental report recelver or trustee emi	is true and powered to	accurate and that execute this repor	my signa t as requ	ture spall bave ti	ne same legal ettegt a	is it made under d	oain: mai i am an oill	ceroraireciar	

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