

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002838

FILED
May 05, 2009
Secretary of State

Entity Name: JESUS IS THE ANSWER JESUS IS THE WAY INCORPORATED

Current Principal Place of Business:

HOME OFFICE
WEST PALM BEACH, FL 33405

New Principal Place of Business:

Current Mailing Address:

PO BOX 6483
WEST PALM BEACH, FL 33405

New Mailing Address:

FEI Number: 65-0802677 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SELLERS, LENA M PASTOR
629 FOREST HILL BLVD
WEST PALM BEACH, FL 33405 US

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: SELLERS, LENA M PASTOR
Address: 629 FOREST HILL BLVD
City-St-Zip: WEST PALM BEACH, FL 33405

Title: VP () Delete
Name: SELLERS, RAMON PASTOR
Address: 629 FOREST HILL BLVD
City-St-Zip: WEST PALM BEACH, FL 33405

Title: SEC () Delete
Name: HILL, SHERRI D SEC
Address: 351 CROSSING BLVD APT 126
City-St-Zip: ORANGE PARK, FL 32073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SEC (X) Change () Addition
Name: HILL, SHERRI D SEC
Address: 6371 COLLINS RD APT 1114
City-St-Zip: JACKSONVILLE, FL 32244

I hereby certify that the information supplied with this filing does not qualify 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: LENA SELLERS

PD

05/05/2009

Electronic Signature of Signing Officer or Director

Date