

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 29, 2006 8:00 am
Secretary of State

03-29-2006 90139 019 ****61.25

DOCUMENT # N97000003635

1. Entity Name

UNITED NEW JERUSALEM CHURCH OF JESUS CHRIST,
INC.



Principal Place of Business

Mailing Address

UNITED NEW JERUSALEM CHURCH OF JC INC
2007 DESOTA AVE
SNEADS FL 32460
US

P.O. BOX 304
SNEADS FL 32460

00000J06



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RAINES, WILLIS L SR
2007 DESOTA AVE.
SNEADS FL 32460

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME RAINES, WILLIS L SR.
STREET ADDRESS P. O. BOX 304 N/A
CITY-ST-ZIP SNEADS FL 32460 ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD
NAME CARROLL, JOUQUETTE
STREET ADDRESS 3383 TENDELL RD.
CITY-ST-ZIP COTTONDALE FL 32431 ☒ Delete

TITLE ☒ Change ☐ Addition
NAME Broderick L. Raines, Sr.
STREET ADDRESS 4383 Type 10 Ct.
CITY-ST-ZIP Marianna, FL 32448

TITLE SD
NAME CARROLL, SHIRLEY
STREET ADDRESS 3383 TENDELL RD.
CITY-ST-ZIP COTTONDALE FL 32431 ☒ Delete

TITLE ☒ Change ☐ Addition
NAME Sharon A. McMillon
STREET ADDRESS 829 Bethel St.
CITY-ST-ZIP Chattahoochee, FL 32324

TITLE TD
NAME LEWIS, KAREN D
STREET ADDRESS P. O. BOX 74 N/A
CITY-ST-ZIP SNEADS FL 32460 ☒ Delete

TITLE ☒ Change ☐ Addition
NAME Lauratta B. Adams
STREET ADDRESS 76 Mason Road
CITY-ST-ZIP Chattahoochee, FL 32324

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME Adrian Lewis
STREET ADDRESS 144 Ave. East
CITY-ST-ZIP Port St. Joe, FL 32456

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME Kendrick V. Raines
STREET ADDRESS 308 W. River Rd.
CITY-ST-ZIP Chattahoochee, FL 32324

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the 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.

SIGNATURE: Willis L. Raines Sr.

3-12-06