## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000000591

FILED Aug 31, 2006 Secretary of State

Entity Name: JESUS CARES MISSION MINISTRIES, INC.

urrent P	rincipal Place of Business:	New Principal Place of Business:
778 RS. RIO GRANDE AVENUE DRLANDO, FL 32839 Current Mailing Address:		1413 34TH STREET ORLANDO, FL 32839
		New Mailing Address:
O BOX 5 RLAND	555608 D, FL 32855	
accordan	: 59-3483615 FEI Number Applied For() ice with s. 607.193(2)(b), F.S., the corporation did I Address of Current Registered Agent:	•
523 GUII	R, YVONNE NYARD WAY D, FL 32805 US	
	e named entity submits this statement for the e of Florida.	e purpose of changing its registered office or registered agent, or both
IGNATU	RE:	
	Electronic Signature of Registered	Agent Date
FFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO
tle: ame: ddress: ity-St-Zip:	2VDS ( ) Delete PRIESTER, YVONNE ASST 1523 GUINYARD WAY ORLANDO, FL 32805	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
tle: ame: ldress: ty-St-Zip:	VDS () Delete PRIESTER, ARTESHA ASST 5928 FIRESTONE RD #108 JACKSONVILLE, FL 32244	Title: VDS (X) Change ( ) Addition Name: PRIESTER, ARTESHA ASST Address: 5928 FIRESTONE COURT City-St-Zip: JACKSONVILLE, FL 32210
tle:	D ( ) Delete SKIPPER, G. K 2045 JAMMES RD	Title: D (X) Change ( ) Addition Name: SKIPPER, G. K Address: 2045 JAMMES RD #262
ame: Idress: ty-St-Zip:	JACKSONVILLE, FL 32244	City-St-Zip: JACKSONVILLE, FL 32244
ıme: ldress:	JACKSONVILLE, FL 32244  D ( ) Delete  LAMB, CLAUDIA  1804 ELMRIDGE COURT  ORLANDO, FL 32808	City-St-Zip: JACKSONVILLE, FL 32244  Title: S (X) Change ( ) Addition Name: RACKARD, DIANE Address: 3778R S RIO GRANDE City-St-Zip: ORLANDO, FL 32839
ime: dress: ty-St-Zip: le: ime: dress:	D ( ) Delete LAMB, CLAUDIA 1804 ELMRIDGE COURT	Title: S (X) Change ( ) Addition Name: RACKARD, DIANE Address: 3778R S RIO GRANDE

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: YVONNE PRIESTER 2NDV 08/31/2006