2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002807

Entity Name: THE JOY OF LIVING CHURCH OF GOD, INC

FILED Apr 24, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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455 N HAVERHILL RD WEST PALM BEACH, FL 33415

Current Mailing Address: New Mailing Address:

455 N HAVERHILL RD WEST PALM BEACH, FL 33415

FEI Number: 65-0791750 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DOUGLAS, EUSTACE

268 PINE AVENUE

WEST PALM BEACH, FL 33413 US

DOUGLAS, EUSTACE

465 COTTAGEWOOD LANE

ROYAL PALM BEACH, FL 33411 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: 04/24/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:D() DeleteTitle:PAS(X) Change () AdditionName:DOUGLAS, EUSTACEName:DOUGLAS, EUSTACEAddress:3909 HEATH CIRCLE NORTHAddress:465 COTTAGEWOOD LANECity-St-Zip:WEST PALM BEACH, FL 33407City-St-Zip:ROYAL PALM BEACH, FL 33411

Title: D () Delete Title: PAST (X) Change () Addition Name: WORRELL, EDNA Name: WORRELL, EDNA

Address: 637 CASHIERS DR. Address: 637 CASHIERS DR. City-St-Zip: WEST PALM BEACH, FL 33413 City-St-Zip: WEST PALM BEACH, FL 33413

Title: D () Delete Title: D (X) Change () Addition Name: DOUGLAS, IRIS DOUGLAS, IRIS

Address: 3909 HEATH CIRCLE NORTH WEST Address: 465 COTTAGEWOOD LANE
City-St-Zip: WEST PALM BEACH, FL 33407 City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: D () Delete Title: PAST (X) Change () Addition

 Name:
 MOORE, CYNTHIA
 Name:
 MOORE, CYNTHIA

 Address:
 2348 PAR RD
 Address:
 2348 PAR RD

City-St-Zip: WEST PALM BEACH, FL 33409 City-St-Zip: WEST PALM BEACH, FL 33409

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: EUSTACE DOUGLAS PAST 04/24/2008