2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# N98000005872

Entity Name: JESUS J.A.M. MINISTRIES, INCORPORATED

Current Principal Place of Business:

153 FLORENCE DRIVE
DEFUNIAK SPRINGS, FL 32433

New Principal Place of Business:

Current Mailing Address:

P.O. 375
DEFUNIAK SPRINGS, FL 32435 US

New Mailing Address:

FEI Number: 59-3539973 **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:

NOBLES, SERRENA
153 FLORENCE DRIVE
DEFUNIAK SPRINGS, FL 32433 US

Name and Address of New Registered Agent:

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: D ( ) Delete
Name: NOBLES, SERRENA
Address: 153 FLORENCE DRIVE
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: D ( ) Delete
Name: BAKER, PATRICIA
Address: 241 QUBEC AVE
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: D ( ) Delete
Name: CAMPBELL, PATRICK
Address: NOTH 1ST ST.
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition
Name: CAMPBELL, PATRICIA
Address: NORTH 1ST ST.
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

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: SERRENA NOBLES D 05/01/2006

Electronic Signature of Signing Officer or Director — Date