2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2009
Secretary of State

DOCUMENT# N99000001601

Entity Name: RECONCILIATION CHURCH OF JESUS CHRIST MINISTRY, INC.

Current Principal Place of Business:

2424 SW 42 TERRACE
FORT LAUDERDALE, FL 33317

New Principal Place of Business:

Current Mailing Address:

2424 SW 42 TERRACE
FORT LAUDERDALE, FL 33317

New Mailing Address:

FEI Number: 65-0905589 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CASORIA, S M III
1040 BAYVIEW DRIVE STE. 600
FT. LAUDERDALE, FL 33304 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: PD ( ) Delete
Name: JACKSON, DARCY
Address: 2424 SW 42 TERRACE
City-St-Zip: FORT LAUDERDALE, FL 33317

Title: STD ( ) Delete
Name: JACKSON, CYNTHIA
Address: 2424 SW 42 TERRACE
City-St-Zip: FORT LAUDERDALE, FL 33317

Title: UD ( ) Delete
Name: MCGILL, BEN
Address: 2504 NW 31 AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: D ( ) Delete
Name: JACKSON, ANNIE
Address: 1652 NW 17 AVE
City-St-Zip: POMPANO BEACH, FL 33069

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: DARCY JACKSON PD 02/08/2009

Electronic Signature of Signing Officer or Director — Date