


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

<b>DOCUMENT # N99000002400</b> 1. Entity Name <b>JEWELS MINISTRIES, INC.</b>	
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FILED  
07 MAY -1 PM 2: 12

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



05012007 Chg-NP CR2E037 (12/06)

Principal Place of Business <b>8438 COLBERT ROAD TALLAHASSEE, FL 32315</b>	Mailing Address <b>POST OFFICE BOX 135 WOODVILLE, FL 32362</b>
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2. Principal Place of Business - No P.O. Box #  Suite, Apt. #, etc.	3. Mailing Address  Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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4. FEI Number <b>NOT APPLICABLE</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
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<b>6. Name and Address of Current Registered Agent</b>  <b>MCMILLIAN, EDNA 2810 JIM LEE RD. TALLAHASSEE, FL 32301</b>
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<b>7. Name and Address of New Registered Agent</b>  Name  Street Address (P.O. Box Number is Not Acceptable)  City <span style="float: right;"><b>FL</b></span> Zip Code
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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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning)

**Filing Fee is \$61.25  
Due by May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
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**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS	
TITLE	D <input type="checkbox"/> Delete CLEMONS, EDWIN O 2810 JIM LEE RD. TALLAHASSEE, FL 32301
TITLE	D <input type="checkbox"/> Delete CLEMONS, CYNTHIA 2810 JIM LEE RD. TALLAHASSEE, FL 32301
TITLE	D <input type="checkbox"/> Delete RANDOLPH, ISAAC 2810 JIM LEE RD. TALLAHASSEE, FL 32301
TITLE	D <input type="checkbox"/> Delete MCMILLIAN, EDNA 2810 JIM LEE RD. TALLAHASSEE, FL 32301
TITLE	D <input type="checkbox"/> Delete RANDOLPH, ALETHIA 2810 JIM LEE RD. TALLAHASSEE, FL 32301
TITLE	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Edna McMillian Date: 5/1/07 Daytime Phone #: 219-0322  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR