


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2008 8:00 am
Secretary of State

04-21-2008 90048 035 ****70.00

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1. Entity Name
 THE NEW JERUSALEM OF JESUS CHRIST CHURCH, INC.



Principal Place of Business
 1053 5TH AVE. NO.
 NAPLES, FL 34102

Mailing Address
 1053 5TH AVE. NO.
 NAPLES, FL 34102

2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

Zip Country

03262008 Chg-NP CR2E037 (12/06)

4. FEI Number
 59-3573101

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required



6. Name and Address of Current Registered Agent

BEAUPLAN, DELIVRA
 145 SABAL LAKE
 NAPLES, FL 34104

7. Name and Address of New Registered Agent

Name **BEAUPLAN, DELIVRA**

Street Address (P.O. Box Number is Not Acceptable)
70 22ND STREET S. E.

City **NAPLES** FL Zip Code **34117**

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 Delivra Beauplan DATE 04-16-08

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BEAUPLAN, DELIVRA 145 SABAL LAKE NAPLES, FL 34104 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BEAUPLAN, DELIVRA 70 22 ND STREET S. E. NAPLES, FL 34117 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BEAUPLAN, JULIE 145 SABAL LAKE NAPLES, FL 34104 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BEAUPLAN, JULIE 70 22 ND STREET S. E. NAPLES, FL 34117 <input checked="" 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: Delivra Beauplan (23A) 353-0625
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 04-16-08 Daytime Phone #