

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11514

FILED  
Apr 30, 2006  
Secretary of State

Entity Name: JUBILEE CHRISTIAN CENTER, INC.

**Current Principal Place of Business:**

571 WETHERSFIELD PL  
MELBOURNE, FL 32940 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 411076  
MELBOURNE, FL 329411076 US

**New Mailing Address:**

FEI Number: 59-2578349

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BLACK, GERALD M.  
571 WETHERSFIELD PLACE  
MELBOURNE, FL 32940 US

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

BLACK, GERALD M MR.  
571 WETHERSFIELD PLACE  
MELBOURNE, FL 32940 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: GERALD M. BLACK

04/30/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BLACK, GERALD M.,  
Address: 571 WETHERSFIELD PLACE  
City-St-Zip: MELBOURNE, FL 32940 US

Title: STD ( ) Delete  
Name: BLACK, PATRICIA L.,  
Address: 571 WETHERSFIELD PLACE  
City-St-Zip: MELBOURNE, FL 32940 US

Title: D ( ) Delete  
Name: MCLARTY, JAN,  
Address: 1435 HAGEN LANE  
City-St-Zip: ROCKLEDGE, FL 32955 US

Title: DR ( ) Delete  
Name: HOY, JEFFREY D  
Address: 2820 BUSINESS CENTER BLVD.  
City-St-Zip: MELBOURNE, FL 32940 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: BLACK, GERALD M MR.  
Address: 571 WETHERSFIELD PLACE  
City-St-Zip: MELBOURNE, FL 32940 US

Title: STD (X) Change ( ) Addition  
Name: BLACK, PATRICIA L MRS.  
Address: 571 WETHERSFIELD PLACE  
City-St-Zip: MELBOURNE, FL 32940 US

Title: D (X) Change ( ) Addition  
Name: MCLARTY, JAN MS.  
Address: 1435 HAGEN LANE  
City-St-Zip: ROCKLEDGE, FL 32955 US

Title: D (X) Change ( ) Addition  
Name: HOY, JEFFREY D DR.  
Address: 2820 BUSINESS CENTER BLVD.  
City-St-Zip: MELBOURNE, FL 32940 US

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: PATRICIA L. BLACK

STD

04/30/2006

Electronic Signature of Signing Officer or Director

Date