## 2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## **DOCUMENT # N24868**

1. Entity Name

MIGHTY LIVING LORD GOD ALMIGHTY IN JESUS CHRIST MINISTRY CORP.



**FILED** Apr 27, 2006 08:00 AM Secretary of State

Principal Place of Business

C/O JACOB JOHN KEYE 2244 COURTNEY DR

JACKSONVILLE, FL 32208 US

Mailing Address

C/O JACOB JOHN KEYE 2244 COURTNEY DR JACKSONVILLE, FL 32208 US



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04142006 No Chg-NP CR2E037 (11/05)

4. FEI Number 59-3604429

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KEYE, JACOB JOHN 2244 COURNTEY DR JACKSONVILLE, FL 32208

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

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 Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating)  DATE						
	Filing Fee is \$61.25 Due by May 1, 2006	Election Campaign Finance     Trust Fund Contribution.	eing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KEYE, JACOB JOHN 2244 COURTNEY DR JACKSONVILLE, FL			U00000537179 U5/U9/06-80007-013 <b>70.00</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KEYE, ALAND S 17667 S W 28TH COURT MIRAMAR, FL 33029					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RODMAN, SHARON D. 3650 RING LANE APT. 207 JACKSONVILLE, FL		DO NOT WRITE IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TILLMAN, HARRIS 3303 PEARL ST JACKSONVILLE, FL 32206					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD WHITEHURST, MARIAN 2259 COURTNEY DRIVE JACKSONVILLE, FL 32208					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LUNDY, JAMES R JR 11333 AMERICANA LANE E JACKSONVILLE, FL 32218					
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 eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 517, 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.						