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Secretary of State
04-17-2008 90033 045 ****70.00

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N24868

1. Entity Name
MIGHTY LIVING LORD GOD ALMIGHTY IN JESUS CHRIST MINISTRY CORP.

40070406

Principal Place of Business	Mailing Address
9142 4TH AVENUE JACKSONVILLE, FL 32208 US	P.O. BOX 77511 JACKSONVILLE, FL 32208 US

04152008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

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	7. Name and Address of New Registered Agent
KEYE, JACOB JOHN 9142 4TH AVENUE JACKSONVILLE, FL 32208	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 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 KEYE, JACOB JOHN 2244 COURTNEY DR JACKSONVILLE, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KEYE, ALAND S. 17667 S.W 28TH COURT MIRAMAR, FL 33029	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Lundy, James R. Jr. 11333 Americana Lane E. Jacksonville, FL 32218	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RODMAN, SHARON D. 3650 RING LANE APT. 207 JACKSONVILLE, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TILLMAN, HARRIS 3303 PEARL ST JACKSONVILLE, FL 32206	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD WHITEHURST, MARIAN 2259 COURTNEY DRIVE JACKSONVILLE, FL 32208	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP LUNDY, JAMES R JR 11333 AMERICANA LANE E JACKSONVILLE, FL 32218	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Keye, Aland S 17667 SW 28th Court Miramar, FL 33029	☒ Change ☐ Addition

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: Jacob John Keye 4-15-2008 (904-304-3961)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #