

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24868

FILED
Mar 19, 2009
Secretary of State

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

Current Principal Place of Business:

9142 4TH AVENUE
JACKSONVILLE, FL 32208 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 77511
JACKSONVILLE, FL 32208 US

New Mailing Address:

9142 4TH AVENUE
JACKSONVILLE, FL 32208 US

FEI Number: 59-3604429

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KEYE, JACOB JOHN
9142 4TH AVENUE
JACKSONVILLE, FL 32208 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KEYE, JACOB JOHN
Address: 2244 COURTNEY DR
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: LUNDY, JAMES R JR
Address: 11333 AMERICAN LANE E
City-St-Zip: JACKSONVILLE, FL 32218

Title: D () Delete
Name: RODMAN, SHARON D.
Address: 3650 RING LANE APT. 207
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: TILLMAN, HARRIS
Address: 3303 PEARL ST
City-St-Zip: JACKSONVILLE, FL 32206

Title: STD () Delete
Name: WHITEHURST, MARIAN
Address: 2259 COURTNEY DRIVE
City-St-Zip: JACKSONVILLE, FL 32208

Title: VP () Delete
Name: KEYE, ALAND S
Address: 17667 SW 28TH CT
City-St-Zip: HOLLYWOOD, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JACOB JOHN KEYE

PD

03/19/2009

Electronic Signature of Signing Officer or Director

Date