2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N24868

1. Entity Name

MIGHTY LIVING LORD GOD ALMIGHTY IN JESUS CHRIST



FILED Apr 21, 2003 8:00 am § Secretary of State

04-21-2003 90542 049 ****70.00

MINISTRY	CORP.						15	1			
Principal Place of Business C/O JACOB JOHN KEYE 2244 COURTNEY DR JACKSONVILLE FL 32208			Mailing Address C/O JACOB JOHN KEYE 2244 COURTNEY DR JACKSONVILLE FL 32208			L					
US			US								
2. Principal Place of Business				3. Mailing Address							
Suite, Apt. #, etc.				Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES			
City & State				City & State				4. FEI Number 59-3604429 Applied For Not Applicable			
Zip Country			Z	ip	Cou	Country		5. Certificate of Sta	itus Desired	\$8.75 Ad Fee Require	ditional
	6. Name	and Address of Current	Register	ed Agent				7. Name and Addr	ess of New Re	gistered Agent	
		and the second second	المسائلة المالية	<u>زن بغامہ برو</u> نسامیہ را د		~ Name ~	در <u>ت</u>				
KEYE, JACOB JOHN 2244 COURNTEY DR				Street Address			ddress (F	(P.O. Box Number is Not Acceptable)			
JACKSONVILLE FL 32208											
					City	FL Zip Code					
8. The above the obligat	e named entity tions of registe	y submits this statement for ered agent.	r the purp	pose of changing its	register	ed office or	registere	ed agent, or both, in the	he State of Flor	ida. I am familiar with,	and accept
SIGNATURE		Ř,									}
0.0,1	Signature, typed	or printed name of registered agent	and title if ap	plicable. (NOTE	: Ragistere	d Agent signati	ire required	when reinstating)		DATE	
*		•									
FILE NOW: FEE IS \$61.25				9. Election Campaign Financing Trust Fund Contribution.				\$5.00 May Be Added to Fees		e Check Payable a Department of	
10.		OFFICERS AND DIF	RECTORS	L	11.		A	DDITIONS/CHANGE	S TO OFFICER	S AND DIRECTORS IN	I 10
TITLE	PD	<u> </u>		□ Delete	TITLE	-	D,			☐ Change	Addition
NAME	KEYE, JAC				NAM	E	Hai	rris Till 3 Pearl Klonville	man		
STREET ADDRESS CITY-ST-ZIP	JACKSON'	RTNEY DR				et address -St-Zip	<u>330</u>	3 Pearl	Utre	# ,	
TITLE	D	VILLE FL		□ Delete	TITLE	:	Jac	KSonville	FLC	3 2206 ☐ Change	▼ Addition
NAME	KEYE, ALA	ND S		□ Delete	NAM	T	1:4	He Adlin		_ ·	JAJ ROGILIGII
STREET ADDRESS		28TH COURT			STRE	ET ADDRESS	3/2	570110	00	Apt.#2	}
CITY-ST-ZIP	MIRAMAR	FL 33029			CITY	-ST-ZIP	Jac	Ksonville-	ELLIZ	277	
TITLE	D	4445611 B		Delete	TITLE	1		,		☐ Change	☐ Addition
NAME STREET ADDRESS		Sharon D. Lane apt. 207		•	NAM	,					
CITY-ST-ZIP	JACKSON					ET ADDRESS -ST-ZIP					
TITLE	D	VILLE I E		□ Delete	TITLE	— 				Change	Addition
NAME	_	, DONALD D		□ Delete	NAMI					change	C Addition
STREET ADDRESS		RENTO STREET			STRE	et address					
CITY-ST-ZIP		VILLE FL 32211	. <u></u>		CITY	-ST-ZIP		·			
TITLE	STD			🔀 Delete	TITLE	:	JTI) <u> </u>		💢 Change	Addition
NAME	BROWN, T				NAMI	E	Mar	ian Eave	es Wh	tehunst	
STREET ADDRESS CITY-ST-ZIP	3012 W. 5					et address -ST-Zip	<u>42</u> 5	9 Courtn	ey Dr	itehurst	
	VP JACKSON	VILLE FL 32254					Jac	Ksonville	FL.30		
TITLE NAME	BROWN, C	EDRIC I		☐ Delete	TITLE	í				☐ Change	☐ Addition
STREET ADDRESS	36 DUDLE					ET ADDRESS					}
CITY-ST-ZIP		BEACH FL 32233			•	·ST-ZIP					Ì
		information supplied with	this filing		the aver		ad in Car	tion 110 07/3V/V Flor	ida Ctor dan 16		

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 an other like empowered.