

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001974

FILED
Apr 26, 2005
Secretary of State

Entity Name: KINGDOM FELLOWSHIP, INC.

Current Principal Place of Business:

4241 BAYMEADOWS ROAD
#11
JACKSONVILLE, FL 32217

New Principal Place of Business:

Current Mailing Address:

4241 BAYMEADOWS ROAD
#11
JACKSONVILLE, FL 32217

New Mailing Address:

FEI Number: 59-3504313 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALL, STEVEN R
3674 SAN VISCAYA DRIVE
JACKSONVILLE, FL 32217 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: HALL, STEVEN R
Address: 3674 SAN VISCAYA DRIVE
City-St-Zip: JACKSONVILLE, FL 32217

Title: VPD () Delete
Name: MCINTYRE, HOWARD
Address: 8039 CUMBERLAND GAP TRAIL NORTH
City-St-Zip: JACKSONVILLE, FL 32244

Title: VPD () Delete
Name: MCLAUGHLIN, VAUGHN
Address: 4241 BAYMEADOWS ROAD #11
City-St-Zip: JACKSONVILLE, FL 32219

Title: TD () Delete
Name: BREWER, DON
Address: 4241 BAYMEADOWS ROAD #11
City-St-Zip: JACKSONVILLE, FL 32217

Title: SD () Delete
Name: HALL, GINGER
Address: 4241 BAYMEADOWS ROAD #11
City-St-Zip: JACKSONVILLE, FL 32217

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: TD (X) Change () Addition
Name: FITZPATRICK, THOMAS
Address: 2006 WOODLEIGH DRIVE W
City-St-Zip: JACKSONVILLE, FL 32211

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STEVEN HALL

Electronic Signature of Signing Officer or Director

PRES

04/26/2005

_____ Date