

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001974

FILED  
Mar 11, 2009  
Secretary of State

Entity Name: KINGDOM FELLOWSHIP, INC.

**Current Principal Place of Business:**

8493 BAYMEADOWS WAY  
#2  
JACKSONVILLE, FL 32256

**New Principal Place of Business:**

**Current Mailing Address:**

8493 BAYMEADOWS WAY  
#2  
JACKSONVILLE, FL 32256

**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: MCLAUGHLIN, VAUGHN BISHOP  
Address: 5119 NORMANDY BLVD.  
City-St-Zip: JACKSONVILLE, FL 32205

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

Title: SD      ( ) Delete  
Name: HALL, GINGER  
Address: 8493 BAYMEADOWS WAY #2  
City-St-Zip: JACKSONVILLE, FL 32256

**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:

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: STEVEN R. HALL

PD

03/11/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date