## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000004417

Entity Name: KINGDOM PERCEPTION, INC.

FILED Feb 10, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1718 NW 52 AVENUE 1514 CENTURION DR LAUDERHILL, FL 33313 1514 CENTURION DR HEPHZIBAH, GA 30815

Current Mailing Address: New Mailing Address:

1718 NW 52 AVENUE 1514 CENTURION DR LAUDERHILL, FL 33313 1514 CENTURION DR HEPHZIBAH, GA 30815

FEI Number: 26-0489254 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ALCEUS, GENESTER

1718 NW 52 AVENUE

LAUDERHILL, FL 33313 US

ALCEUS, GENESTER

1514 CENTURION DR

HEPHZIBAH, FL 30815 US

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: GENESTER ALCEUS 02/10/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 ALCEUS, GENESTER
 Name:
 ALCEUS, GENESTER

 Address:
 1718 NW 52 AVENUE
 Address:
 1514 CENTURION DR

 City-St-Zip:
 LAUDERHILL, FL 33313
 City-St-Zip:
 HEPHZIBAH, GA 30815

Title: S ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 THOMPSON, SCKENNIA
 Name:

 Address:
 1615 NW 54 TER
 Address:

 City-St-Zip:
 LAUDERHILL, FL 33313
 City-St-Zip:

Title: T ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BACON, MILDRED
 Name:

 Address:
 1240 HAMPTON BLVD. #4-34
 Address:

 City-St-Zip:
 NORTH LAUDERDALE, FL 33368
 City-St-Zip:

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad {\sf ()} \ {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad {\sf (X)} \ {\sf Change} \ {\sf ()} \ {\sf Addition}$ 

 Name:
 ALCEUS, INNOCENT
 Name:
 ALCEUS, INNOCENT

 Address:
 1718 NW 52 AVENUE
 Address:
 1514 CENTURION DR

 City-St-Zip:
 LAUDERHILL, FL 33313
 City-St-Zip:
 HEPHZIBAH, GA 30815

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: GENESTER ALCEUS P 02/10/2009