2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2009
Secretary of State

DOCUMENT# N07000002827

Entity Name: KINGDOM LIVING MINISTRIES INTERNATIONAL, INC.

Current Principal Place of Business:

20423 STATE ROAD 7
#410
BOCA RATON, FL 33498

New Principal Place of Business:

Current Mailing Address:

20423 STATE ROAD 7
#410
BOCA RATON, FL 33498

New Mailing Address:

FEI Number: 20-8668374 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DIBUCCI, TOM
20423 STATE ROAD 7
#410
BOCA RATON, FL 33498 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: D ( ) Delete
Name: DIBUCCI, TOM
Address: 20423 STATE ROAD 7, #410
City-St-Zip: BOCA RATON, FL 33498

Title: D ( ) Delete
Name: DIBUCCI, CYNDIE
Address: 20423 STATE ROAD 7, #410
City-St-Zip: BOCA RATON, FL 33498

Title: D ( ) Delete
Name: CURCIO, ALEX
Address: 18065 LONG LAKE DR.
City-St-Zip: BOCA RATON, FL 33496

Title: D ( ) Delete
Name: SANTIAGO RIOS, MARIA
Address: 3808 MIRAMONTES CIRCLE
City-St-Zip: WELLINGTON, FL 33414

Title: D ( ) Delete
Name: HORTON, OKSANA
Address: 20223 SE 26TH STREET
City-St-Zip: SAMMAMISH, WA 98075

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: TOM DIBUCCI DIR 04/16/2009

Electronic Signature of Signing Officer or Director — Date