

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011694

Entity Name: KINGDOM IMPACT MINISTRIES INTERNATIONAL INC.**Current Principal Place of Business:**8197-14 N.UNIVERSITY DR.
TAMARAC, FL 33321**Current Mailing Address:**P.O. BOX 770515
CORALSPRINGS, FL 33321 US**FEI Number: 74-3243258****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GRAHAM, JUDY M
9762 N.GRANDDUKE CIRCLE
TAMARAC, FL 33321 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	P
Name	GRAHAM, CORNELIUS
Address	9762 N.GRANDDUKE CIRCLE
City-State-Zip:	TAMARAC FL 33321

Title	S
Name	GRAHAM-JOHNSON, ADA M
Address	3271 S.W.4TH ST.
City-State-Zip:	DEERFIELD,BCH FL 33442

Title	D
Name	GODDARD, BERTHA
Address	130 NW 33TERRACE
City-State-Zip:	FORT LAUDERDALE FL 33311

Title	VP
Name	GRAHAM, JUDY M
Address	9762 N.GRANDDUKE CIRCLE
City-State-Zip:	TAMARAC, FL 33321

Title	T
Name	HICKS, COREY
Address	8875 NW 27ST
City-State-Zip:	CORALSPRINGS FL 33065

Title	O
Name	HARRIS, ELMINER
Address	11000 GATESDEN DR. APT.130
City-State-Zip:	TAMBALL TX 77377

I hereby 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 all other like empowered.

SIGNATURE: CORNELIUS GRAHAM**PRESIDENT****06/11/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date