## 2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000007685

**Entity Name: KINGDOM EXPANSION MINISTRIES INTERNATIONAL INC** 

**FILED** Mar 29, 2021 **Secretary of State** 5115068190CC

## **Current Principal Place of Business:**

1501 PARTIN DR. N. **APT 251** NICEVILLE, FL 32578

## **Current Mailing Address:**

1501 PARTIN DR. N. **APT 251** 

NICEVILLE, FL 32578 US

FEI Number: 27-3241667 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

Name

1501 PARTIN DR N APT 251 NICEVILLE, FL 32578 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: KEVIN MARTIN 03/29/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

**PRES** Title Title SEC

MARTIN, KEVIN MARTIN, DEBORAH Name Name Address 1501 PARTIN DR. N. Address 1501 PARTIN DR. N.

APT 251 **APT 251** 

NICEVILLE FL 32578 NICEVILLE FL 32578 City-State-Zip: City-State-Zip:

Title **TRES** Title DIR

MARTIN, JASON REECE, PHILLIP Name Name 424 GREGG STREET 26 QUIET COVE Address Address

HAMMOCK BAY BATESBURG-LEESVILLE SC 29070 City-State-Zip:

City-State-Zip: FREEPORT FL 32439

Title DIR Title **DIRECTOR** 

Name NIEDBALSKI, ALAN 26 QUIET COVE Address Address 4084 BOND CIRCLE HAMMOCK BAY

City-State-Zip: NICEVILLE FL 32578 FREEPORT FL 32439 City-State-Zip:

Title DIRECTOR

Name NIEDBALSKI, SUZANNE 4084 BOND CIRCLE Address City-State-Zip: NICEVILLE FL 32578

REECE, N. DEAN

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.

03/29/2021 SIGNATURE: KEVIN P. MARTIN **PRESIDENT**