

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000001539

**Entity Name:** KINGDOM WAY MINISTRIES, INC.**Current Principal Place of Business:**5115 47TH PL. N.  
WEST PALM BEACH, FL 33407**Current Mailing Address:**P O BOX 1802  
WEST PALM BEACH, FL 33402**FEI Number:** 61-1660622**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BROOKS, CLOTILLA  
4113 HEATH CIRCLE SOUTH  
WEST PALM BEACH, FL 33407 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 PRESIDENT, PASTOR  
Name BROOKS, DANIEL  
Address 4113 HEATH CIRCLE SOUTH  
City-State-Zip: WEST PALM BEACH FL 33407

Title DIRECTOR  
Name HOLLOMAN, BARBARA  
Address 1116 GREEN PINE BLVD  
B2  
City-State-Zip: WEST PALM BEACH FL 33409

Title DIRECTOR  
Name GRIFFIN, MATIYA  
Address 2856 TENNIS CLUB DR  
#605  
City-State-Zip: WEST PALM BEACH FL 33417

Title TREASURER, DIRECTOR  
Name JASTROME, KIMBERLY  
Address 6036 ADRIATIC WAY  
City-State-Zip: WEST PALM BEACH FL 33413

Title DIRECTOR, SECRETARY  
Name MUHAMMAD, IHDINA  
Address 1354 - 8TH STREET  
City-State-Zip: WEST PALM BEACH FL 33401

Title DIRECTOR  
Name JOSEPH, YVENS  
Address 636 PUTTER PL  
City-State-Zip: WEST PALM BEACH FL 33409

*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: DANIEL BROOKS****PRESIDENT****04/26/2023**

Electronic Signature of Signing Officer/Director Detail

Date