

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Apr 28, 2005 08:00 AM
Secretary of State

DOCUMENT # N01000001619

1. Entity Name

KINGDOM MINISTRIES (C.O.G.) INC.



Principal Place of Business

923 S. 13TH ST.
FERNANDINA BEACH FL 32034

Mailing Address

PO BOX 16299
FERNANDINA BEACH FL 32035



2. Principal Place of Business

3. Mailing Address

Suite, Apt #, etc.

Suite, Apt #, etc.

1st MOORE

CR2E037 (10/04)

City & State

City & State

4. FEI Number

31-1758558

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GARMAN, GUY
3801 S OCEAN DR 4Z
HOLLYWOOD FL 33019

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	AVANT, WARDELL JR	
STREET ADDRESS	PO BOX 16295	
CITY - ST - ZIP	FERNANDINA BEACH FL 32035-3122	
TITLE	D	<input type="checkbox"/> Delete
NAME	ARHTUR, JAMES	
STREET ADDRESS	3662 BAKER DRIVE	
CITY - ST - ZIP	YULEE FL 32097	
TITLE	D	<input type="checkbox"/> Delete
NAME	ARHTUR, JACQUELINE	
STREET ADDRESS	3662 BAKER DRIVE	
CITY - ST - ZIP	YULEE FL 32097	
TITLE	D	<input type="checkbox"/> Delete
NAME	AVANT, BARBARA L	
STREET ADDRESS	923 S 13TH STREET BOX 16295	
CITY - ST - ZIP	FERNANDINA BEACH FL 32034	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	U00000339655	
STREET ADDRESS	04/28/05-80085-014 70.00	
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

Rea Wardell Avant Jr
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-25-05 (904) 321-0018
Date Daytime Phone #