

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005163

FILED
May 12, 2007
Secretary of State

Entity Name: KINGDOM EVANGELISTIC MINISTRIES, INC.

Current Principal Place of Business:

KINGDOM EVANGELIST
SUITES 1,2,+3
JACKSONVILLE, FL 32208

New Principal Place of Business:

Current Mailing Address:

8228 NEW KINGS ROAD
SUITES 1,2,+3
JACKSONVILLE, FL 32208

New Mailing Address:

FEI Number: 59-3757902 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DAVIS, H L SR.
9528 SIBBALD ROAD
JACKSONVILLE, FL 32208 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: PCEO () Delete
Name: DAVIS, HARRY L SR.
Address: 9528 SIBBALD ROAD
City-St-Zip: JACKSONVILLE, FL 32208

Title: SD () Delete
Name: SMITH, KATRINA L
Address: 2231 COMMONWEALTH AVE
City-St-Zip: JACKSONVILLE, FL 32209

Title: TD () Delete
Name: DAVIS, GAIL G
Address: 9528 SIBBALD ROAD
City-St-Zip: JACKSONVILLE, FL 32244

Title: D () Delete
Name: DAVIS, HARRY L JR.
Address: 9528 SIBBALD ROAD
City-St-Zip: JACKSONVILLE, FL 32208

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: DAVIS, SHIAKA V
Address: 2545 ROBERT ST
City-St-Zip: JACKSONVILLE, FL 32209

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: SHIAKA DAVIS

SECT

05/12/2007

Electronic Signature of Signing Officer or Director

_____ Date