

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001364

FILED  
May 27, 2008  
Secretary of State

**Entity Name:** KING OF GLORY MINISTRIES INTERNATIONAL, INC.

**Current Principal Place of Business:**

168 OLD HARD ROAD  
ORANGE PARK, FL 32003

**New Principal Place of Business:**

**Current Mailing Address:**

168 OLD HARD ROAD  
ORANGE PARK, FL 32003

**New Mailing Address:**

**FEI Number:** 91-2185197      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
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:**

**Name and Address of New Registered Agent:**

FONVIELLE, DANIEL L  
168 OLD HARD ROAD  
ORANGE PARK, FL 32003      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

**OFFICERS AND DIRECTORS:**

Title: DP      ( ) Delete  
Name: FONVIELLE, DANIEL L  
Address: 168 OLD HARD ROAD  
City-St-Zip: ORANGE PARK, FL 32003

Title: DV      ( ) Delete  
Name: FONVIELLE, MELINDA  
Address: 168 OLD HARD ROAD  
City-St-Zip: ORANGE PARK, FL 32003

Title: DT      ( ) Delete  
Name: FONVIELLE, AUDREY  
Address: 146 OLD HARD ROAD  
City-St-Zip: ORANGE PARK, FL 32003

Title: DS      ( ) Delete  
Name: ENRIGHT, MICHELLE  
Address: 2784 EMILY LANE  
City-St-Zip: JACKSONVILLE, FL 32216

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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: DANIEL L. FONVIELLE

DP

05/27/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date