2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N03000005792

This is a second section of State Secretary of State

Entity Name: KINGDOM HARVEST INC. **Current Principal Place of Business: New Principal Place of Business:** 1050 OLD DIXIE HWY SW VERO BEACH, FL 32962 **Current Mailing Address: New Mailing Address:** 1050 OLD DIXIE HWY SW VERO BEACH, FL 32962 FEI Number: 11-3697936 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HUNT, AUSTIN W 2520 ÓRANGE AVE FORT PIERCE, FL 34947 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition HUNT, AUSTIN W Name: Name: 4210 14TH ST Address: Address: City-St-Zip: VERO BEACH, FL 32960 City-St-Zip: Title: Title: (X) Change () Addition () Delete FLYNT, DAVID J Name: GASKILL, KAREN Name: Address: 1246 41ST AVE Address: 431 34TH CT City-St-Zip: VERO BEACH, FL 32958 City-St-Zip: VERO BEACH, FL 32968 Title: () Delete Title: (X) Change () Addition REARDIN, BRADLEY DAVIS, WESLEY Name: Name: Address: PO BOX 640 Address: 7001 84TH AVE City-St-Zip: ROSELAND, FL 32957 City-St-Zip: VERO BEACH, FL 32967 () Delete Title: Title: () Change () Addition Name: ZINK, DANIEL Name: Address: 7055 29TH CT Address: City-St-Zip: VERO BEACH, FL 32967 City-St-Zip: Title: (X) Delete Title: () Change () Addition BROWN, EDGAR Name: Name: 13939 INDRIO RD. Address: Address: City-St-Zip: FT. PIERCE, FL 34945 City-St-Zip: Title: (X) Delete Title: () Change () Addition BAILEY, ANDRAE J Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: AUSTIN HUNT PRES 04/18/2008

Address:

City-St-Zip:

150 W. MICHIGAN ST.

ORLANDO, FL 32806