2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 12, 2006
Secretary of State

DOCUMENT# N03000007052

Entity Name: KINGDOM INTERNATIONAL, INC.

Current Principal Place of Business:

P.O. BOX 692651
ORLANDO, FL 32869

New Principal Place of Business:

P.O. BOX 691657
ORLANDO, FL 32869

Current Mailing Address:

P.O. BOX 692651
ORLANDO, FL 32869

New Mailing Address:

P.O. BOX 691657
ORLANDO, FL 32869

FEI Number: 58-2656305 **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:

WILLIAMS-CARTER, SYLES ESQ.
7936 MARBELLA COURT SOUTH
ORLANDO, FL 32836 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: P ( ) Delete
Name: SNIPES, LOLITA W
Address: P.O. BOX 692651
City-St-Zip: ORLANDO, FL 32869

Title: S ( ) Delete
Name: BLASINGAME, JOHN THOMAS III
Address: P.O. BOX 692651
City-St-Zip: ORLANDO, FL 32869

Title: T ( ) Delete
Name: SNIPES, JEROME
Address: P.O. BOX 692651
City-St-Zip: ORLANDO, FL 32869

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SNIPES, LOLITA W
Address: P.O. BOX 691657
City-St-Zip: ORLANDO, FL 32869-165

Title: S (X) Change ( ) Addition
Name: BLASINGAME, JOHN THOMAS III
Address: P.O. BOX 691657
City-St-Zip: ORLANDO, FL 32869

Title: T (X) Change ( ) Addition
Name: SNIPES, JEROME
Address: P.O. BOX 691657
City-St-Zip: ORLANDO, FL 32869

I hereby certify that the information supplied with this filing does not qualify for the 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: LOLITA SNIPES P 05/12/2006

Electronic Signature of Signing Officer or Director — Date