

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008300

FILED  
Mar 22, 2011  
Secretary of State

**Entity Name:** ADVANCING THE KINGDOM MINISTRIES INC.

**Current Principal Place of Business:**

601 W. COLUMBIA ST  
ORLANDO, FL 32805

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 585887  
ORLANDO, FL 32858

**New Mailing Address:**

P.O. BOX 585887  
ORLANDO, FL 32858

**FEI Number:** 20-0622901

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

OLIVER, CLARENCE  
1420 RADLEIGH PL  
ORLANDO, FL 32808 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  
Name: OLIVER, CLARENCE  
Address: 1420 RADLEIGH PL  
City-St-Zip: ORLANDO, FL 32808

Title: S/D  
Name: OLIVER, ROSETTA  
Address: 3800 ROSEBORO STREET  
City-St-Zip: ORLANDO, FL 32805

Title: D  
Name: OUTLAW, RICHARD  
Address: 1318 WESTWINDS DR  
City-St-Zip: DAVENPORT, FL 33837

Title: D  
Name: OUTLAW, MINYON  
Address: 1318 WESTWINDS DR  
City-St-Zip: DAVENPORT, FL 33837

Title: D  
Name: ADKINS, YOLANDA T  
Address: 1206 OSPREY RIDGE DR.  
City-St-Zip: EUSTIS, FL 32736

Title: D  
Name: LOGAN, JASON  
Address: 4619 DREXEL AVE  
City-St-Zip: ORLANDO, FL 32808

I hereby 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 all other like empowered.

SIGNATURE: CLARENCE S. OLIVER

PRES

03/22/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date