

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002601

FILED
May 05, 2005
Secretary of State

Entity Name: KINGDOM FINANCIAL SOLUTIONS, INC.

Current Principal Place of Business:

6102 MEDFORD DRIVE
ORLANDO, FL 32808 US

New Principal Place of Business:

Current Mailing Address:

6102 MEDFORD DRIVE
ORLANDO, FL 32808 US

New Mailing Address:

FEI Number: 20-0877123 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:

ROBINSON, WAVERLY L JR.
6102 MEDFORD DRIVE
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: CEO () Delete
Name: ROBINSON, WAVERLY L JR.
Address: 6102 MEDFORD DRIVE
City-St-Zip: ORLANDO, FL 32808 US

Title: COO () Delete
Name: ERNEST, LESTER S
Address: 54 PETEY COURT
City-St-Zip: OCOEE, FL 34763 US

Title: CFO () Delete
Name: LAFLEUR, CURTIS
Address: 1720 NW 191ST STREET
City-St-Zip: MIAMI, FL 33056 US

Title: VP () Delete
Name: BRYANT, DARRYL
Address: 4629 CASON COVE, APT. 1533
City-St-Zip: ORLANDO, FL 32811 FL

Title: VP () Delete
Name: BONNEVILLE, MICHAEL
Address: 2079 SOUTH KIRKMAN ROAD
City-St-Zip: ORLANDO, FL 32811 FL

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:

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WAVERLY ROBINSON

CEO

05/05/2005

Electronic Signature of Signing Officer or Director

Date