# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**May 15, 2007**
**Secretary of State**

DOCUMENT# N05000004550

**Entity Name:** KINGDOM CHRISTIAN CENTER INTERNATIONAL, INC.

**Current Principal Place of Business:**

2958 BELLFLOWER WAY
LAKELAND, FL 33811 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1844
LAKELAND, FL 33802 US

**New Mailing Address:**

P.O. BOX 262
LAKELAND, FL 33802 US

**FEI Number: 61-1487377** **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:**

MCCREE, KELVIN R
2958 BELLFLOWER WAY
LAKELAND, FL 33811 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: PRES ( ) Delete
Name: MCCREE, KELVIN R
Address: 2958 BELLFLOWER WAY
City-St-Zip: LAKELAND, FL 33811 US

Title: VP ( ) Delete
Name: MCCREE, EVETTE M
Address: 2958 BELLFLOWER WAY
City-St-Zip: LAKELAND, FL 33811 US

Title: DIR ( ) Delete
Name: JONES, BRENDA G
Address: 2958 BELLFLOWER WAY
City-St-Zip: LAKELAND, FL 33811 US

Title: DIR ( ) Delete
Name: COLBERT, BRIDJET L
Address: 3783 29TH AVENUE SOUTH
City-St-Zip: ST. PETERSBURG, FL 33712

Title: DIR ( ) Delete
Name: COLBERT, WALTER L
Address: 3783 29TH AVENUE SOUTH
City-St-Zip: ST. PETERSBURG, FL 33712

**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 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: EVETTE MCCREE DIR 05/15/2007
Electronic Signature of Signing Officer or Director — Date