

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005809

FILED
Mar 20, 2009
Secretary of State

Entity Name: KINGDOM FAITH MINISTRIES INTERNATIONAL, INC.

Current Principal Place of Business:

3001 HIGH POINTE PL
PENSACOLA, FL 32505

New Principal Place of Business:

211 W. CERVANTES ST.
#A
PENSACOLA, FL 32501

Current Mailing Address:

3001 HIGH POINTE PL
PENSACOLA, FL 32505

New Mailing Address:

211 W. CERVANTES ST.
#A
PENSACOLA, FL 32501

FEI Number: 34-2052271

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CALDWELL, OTIS J
3001 HIGH POINTE PL
PENSACOLA, FL 32505 US

Name and Address of New Registered Agent:

CALDWELL, OTIS J
211 W. CERVANTES ST.
PENSACOLA, FL 32501 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: OTIS J. CALDWELL

03/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CALDWELL, OTIS J
Address: 3001 HIGH POINTE PL
City-St-Zip: PENSACOLA, FL 32505

Title: D () Delete
Name: CALDWELL, KAREN
Address: 3001 HIGH POINTE PL
City-St-Zip: PENSACOLA, FL 32505

Title: D () Delete
Name: CALDWELL, JOSIAH
Address: 3001 HIGH POINTE PL
City-St-Zip: PENSACOLA, FL 32505

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CALDWELL, OTIS J
Address: 211 W. CERVANTES ST.
City-St-Zip: PENSACOLA, FL 32501

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: OTIS J. CALDWELL

D

03/20/2009

Electronic Signature of Signing Officer or Director

Date