2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006755

FILED Apr 15, 2009 Secretary of State

Entity Name: CHRIST KINGDOM INTERNATIONAL, INC.

Current Principal Place of Business: New Principal Place of Business: 2512 22 AVENUE SOUTH ST PETERSBURG, FL 337123024 **Current Mailing Address: New Mailing Address:** 2512 22 AVENUE SOUTH ST PETERSBURG, FL 337123024 FEI Number: 20-4381744 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LEONARD, PRESTON D.H. BISHOP 2512 22 AVENUE SOUTH ST PETERSBURG, FL 337123024 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete LEONARD, PRESTON D.H. BISHOP LEONARD, PRESTON D.H. BISHOP Name: Name: 223 21 AVE SE SOUTH Address: 2720 12TH AVE. S. Address: City-St-Zip: ST PETERSBURG, FL 337123024 City-St-Zip: ST PETERSBURG, FL 33712 Title: () Delete Title: () Change () Addition BAKER, JOHN E BISHOP Name: Name: Address: 8772 MILES JOHNSON RD Address: City-St-Zip: TALLAHASSEE, FL 32309 City-St-Zip: Title: DST () Delete Title: () Change () Addition EKE-ODURU, YVONNE PASTOR Name: Name: Address: 6425 BANKSIDE ST #2140 Address: City-St-Zip: HOUSTON, TX 77096 City-St-Zip: Title: () Delete Title: () Change () Addition Name: EVANS, FITZROY PASTOR Name: Address: 505 NW 214 ST #105 Address: City-St-Zip: MIAMI, FL 33769 City-St-Zip: Title: () Delete Title: () Change () Addition MCCREE, KELVIN PASTOR Name: Name: 2958 BELLFLOWER WAY Address: Address: City-St-Zip: LAKELAND, FL 33811 City-St-Zip: Title: () Delete Title: () Change () Addition GREEN, ROBERTA J Name: Name: Address: 6125 30TH COURT SOUTH Address: ST PETERSBURG, FL 33712 City-St-Zip: 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: D. H. PRESTON LEONARD DP 04/15/2009