

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000012

FILED
Apr 01, 2009
Secretary of State

Entity Name: KEYS OF AUTHORITY MINISTRIES, INC.

Current Principal Place of Business:

315 KENMORE RD
BRANDON, FL 33511

New Principal Place of Business:

Current Mailing Address:

PO BOX 2818
VALRICO, FL 33595

New Mailing Address:

FEI Number: 83-0441647

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PETERS, JESTEN F
315 KENMORE RD
BRANDON, FL 33511 US

Name and Address of New Registered Agent:

PETERS, JESTEN F REV.
315 KENMORE RD
BRANDON, FL 33511 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: JESTEN F. PETERS

04/01/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: PETERS, JESTEN F
Address: 315 KENMORE RD
City-St-Zip: BRANDON, FL 33511

Title: DV () Delete
Name: NORRIS, BARBARA J
Address: 118 NW KING CT
City-St-Zip: LAKE CITY, FL 32055

Title: DST () Delete
Name: JOHNSON, G. DARLENE
Address: 315 KENMORE RD
City-St-Zip: BRANDON, FL 33511

Title: MBR () Delete
Name: DANIELS, KENNETH M CPA
Address: PO BOX 1689
City-St-Zip: JASPER, FL 32052

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: PETERS, JESTEN F REV.
Address: 315 KENMORE RD
City-St-Zip: BRANDON, FL 33511

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: JESTEN F. PETERS

DP

04/01/2009

Electronic Signature of Signing Officer or Director

Date