

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007263

FILED
May 02, 2008
Secretary of State

Entity Name: KENYA MY PEOPLE MINISTRIES, INC

Current Principal Place of Business:

112 E FLOYD AVE
LAKE MARY, FL 32746 US

New Principal Place of Business:

Current Mailing Address:

112 E FLOYD AVE
LAKE MARY, FL 32746 US

New Mailing Address:

FEI Number: 20-5179969 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:

MUGANZO, WILLIAM W
112 E FLOYD AVE
LAKE MARY, FL 32746 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: P () Delete
Name: MUGANZO, WILLIAM W
Address: 112 E FLOYD AVE
City-St-Zip: LAKE MARY, FL 32746 US

Title: VP () Delete
Name: LEWIS, DOROTHY S
Address: 28012 VIA BONALDE
City-St-Zip: MISSION VIEJO, CA 92692 US

Title: S () Delete
Name: CARLSON, CARL A
Address: 112 E FLOYD AVE
City-St-Zip: LAKE MARY, FL 32746 US

Title: T () Delete
Name: MUGANZO, DIAMOND L
Address: 112 E FLOYD AVE
City-St-Zip: LAKE MARY, FL 32746 US

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:

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: DIAMOND L MUGANZO

T

05/02/2008

Electronic Signature of Signing Officer or Director

Date