

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009729

FILED
Mar 23, 2009
Secretary of State

Entity Name: KAIROS PRISON MINISTRY INTERNATIONAL FOUNDATION, INC.

Current Principal Place of Business:

6903 UNIVERSITY BLVD.
WINTER PARK, FL 32792

New Principal Place of Business:

Current Mailing Address:

6903 UNIVERSITY BLVD.
WINTER PARK, FL 32792

New Mailing Address:

FEI Number: 38-3764153

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

THOMPSON, JOHN A JR
6903 UNIVERSITY BLVD.
WINTER PARK, FL 32792 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: D () Delete
Name: FRYMAN, DENNIS
Address: 243 MONTICELLO
City-St-Zip: GREENWOOD, IN 46142

Title: D () Delete
Name: MCHUGH, BARRIE
Address: 12201 SW 69TH COURT
City-St-Zip: MIAMI, FL 33156

Title: D () Delete
Name: GABRIEL, STEVE
Address: 4280 ZURICH DRIVE
City-St-Zip: COLORADO SPRINGS, CO 80920

Title: D () Delete
Name: MCGLONE, PAUL
Address: 3130 TERRY BROOK, APT.609
City-St-Zip: WINTER PARK, FL 32792

Title: D () Delete
Name: BANKS, ART
Address: 10900 HUNT CLUB ROAD
City-St-Zip: RESTON, VA 20190

Title: D () Delete
Name: BROWN, GEORGE
Address: 4087 CONCORD BLVD.
City-St-Zip: CONCORD, CA 94519

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
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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: PAUL MCGLONE

D

03/23/2009

Electronic Signature of Signing Officer or Director

Date