# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**May 01, 2009**
**Secretary of State**

DOCUMENT# N07000001696

**Entity Name:** KINGDOM HOPE COMMUNITY DEVELOPMENT CORPORATION, INC.

**Current Principal Place of Business:**

3516 MILNER DR S
LAKELAND, FL 33810

**New Principal Place of Business:**

417 N. MASSACHUSETTS AVE.
LAKELAND, FL 33801

**Current Mailing Address:**

3516 MILNER DR S
LAKELAND, FL 33810

**New Mailing Address:**

**FEI Number: 61-1520313** **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:**

BROWN, EARL
910 GRAN BAHAMA BLVD
DAVENPORT, FL 33837 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: BROWN, EARL
Address: P O BOX 92892
City-St-Zip: LAKELAND, FL 33804

Title: D ( ) Delete
Name: BROWN, LINDA K
Address: P O BOX 92892
City-St-Zip: LAKELAND, FL 33804

Title: D ( ) Delete
Name: FORBES, FLOYD
Address: 1358 LEGENDARY BLVD.
City-St-Zip: CLERMONT, FL 34711

Title: D ( ) Delete
Name: GOUNDEN, PREGA
Address: 215 EMERT ST.
City-St-Zip: PIDGEON FORGE, TN 37863

Title: D ( ) Delete
Name: PADILLA-VAZQUEZ, AIDA E.
Address: 3102 TYSON AVE.
City-St-Zip: PHILADELPHIA, PA 19419

**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:

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: R. EARL BROWN PD 05/01/2009
Electronic Signature of Signing Officer or Director — Date