2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008
Secretary of State

DOCUMENT# N07000002003

Entity Name: KINGDOM MANIFEST MINISTRIES, INC.

Current Principal Place of Business:

1716 W. BELLA VISTA STREET
LAKELAND, FL 33805

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 92429
LAKELAND, FL 33804

New Mailing Address:

FEI Number: 37-1538310 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CAMPBELL FREEMAN, BERNITA K
1716 W. BELLA VISTA STREET
LAKELAND, FL 33805 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: MCMILLIAN, TINA
Address: 1108 S. BARTOW RD APT 27
City-St-Zip: LAKELAND, FL 33801

Title: D ( ) Delete
Name: CAMPBELL, CAROLYN
Address: 716 S. LANIER AVENUE
City-St-Zip: FORT MEADE, FL 33841

Title: D ( ) Delete
Name: DAWSON, QUENTIN M
Address: 3055 LILLIAN PASS
City-St-Zip: LAKELAND, FL 33812

Title: P ( ) Delete
Name: CAMPBELL FREEMAN, BERNITA K
Address: 1716 W. BELLA VISTA STREET
City-St-Zip: LAKELAND, FL 33805

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: BERNITA K. CAMPBELL FREEMAN P 04/29/2008

Electronic Signature of Signing Officer or Director — Date