2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000009756

Entity Name: KINGDOM LIFE WORD & WORSHIP CENTER, INC

FILED May 04, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4943 BEACH BLVD
JACKSONVILLE, FL 32207

8050 BAYMEADOW CIR W
JACKSONVILL, FL 32256

Current Mailing Address: New Mailing Address:

4943 BEACH BLVD PO BOX 5068

JACKSONVILLE, FL 32207 JACKSONVILLE, FL 32247

FEI Number: 26-1168566 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: Name and Address of New Registered Agent:

WRIGHT, ANTOINETTE D
4943 BEACH BLVD
JACKSONVILLE, FL 32207 US
WRIGHT, ANTOINETTE D
976 FOX CHAPEL LANE
JACKSONVILLE, FL 32221 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: ANTOINETTE WRIGHT 05/04/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P
 () Delete
 Title:
 P
 (X) Change () Addition

 Name:
 WRIGHT, ANTOINETTE D
 Name:
 WRIGHT, ANTOINETTE D

 Address:
 5943 BEACH BLVD
 Address:
 976 FOX CHAPEL LANE

 City-St-Zip:
 JACKSONVILLE, FL 32207
 City-St-Zip:
 JACKSONVILLE, FL 32221

Title: T () Delete Title: T (X) Change () Addition

 Name:
 RUISE, GLENDA F
 Name:
 RENFRO, DERRICK

 Address:
 5943 BEACH BLVD
 Address:
 7971 118TH STREET

 City-St-Zip:
 JACKSONVILLE, FL 32207
 City-St-Zip:
 JACKSONVILLE, FL 32244

Title: S () Delete Title: S (X) Change () Addition

 Name:
 FLEMMING, CELESTINE
 Name:
 BLAKE, CYNTHIA

 Address:
 5943 BEACH BLVD
 Address:
 5827 GILCREST ROAD

 City-St-Zip:
 JACKSONVILLE, FL 32207
 City-St-Zip:
 JACKSONVILLE, FL 32219

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: ANTOINETTE WRIGHT P 05/04/2009