

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000010222

FILED  
Jun 16, 2010  
Secretary of State

**Entity Name:** WARRIORS FOR KINGDOM TRANSFORMATION MINISTRY, INC.

**Current Principal Place of Business:**

18448 NW 9TH COURT  
PEMBROKE PINES, FL 33029

**New Principal Place of Business:**

**Current Mailing Address:**

18448 NW 9TH COURT  
PEMBROKE PINES, FL 33029

**New Mailing Address:**

**FEI Number:** 26-1432710

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MORRIS, DELAMARCH  
18448 NW 9TH COURT  
PEMBROKE PINES, FL 33029 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  
Name: MORRIS, DELAMARCH  
Address: 18448 NW 9TH COURT  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: DP  
Name: LINDSAY, HYACINTH  
Address: 18448 NW 9TH COURT  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: DS  
Name: BOOKAL, ELAINE  
Address: 18448 NW 9TH COURT  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: DV  
Name: BOOKAL, EGGON (RICKY)  
Address: 18448 NW 9TH COURT  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: DT  
Name: THOMAS, BARBARA  
Address: 18448 NW 9TH COURT  
City-St-Zip: PEMBROKE PINES, FL 33029

I hereby 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 all other like empowered.

**SIGNATURE:** HELINDSAY

PRES

06/16/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date