2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003707

FILED Mar 20, 2009 Secretary of State

Entity Name: THE CHURCH OF KNOWLEDGE MINISTRY INC.

Current Principal Place of Business:		New Principal Place of Busin	New Principal Place of Business:	
	8TH PLACE LL, FL 33311			
Current Ma	ailing Address:	New Mailing Address:		
	8TH PLACE LL, FL 33311			
FEI Number:	FEI Number Applied For (X)	FEI Number Not Applicable () Certif	icate of Status Desired()	
Name and	Address of Current Registered Agent:	Name and Address of New R	egistered Agent:	
	I, SHIRLEY 8TH PLACE LL, FL 33311 US			
The above in the State	named entity submits this statement for the of Florida.	purpose of changing its registered office o	r registered agent, or both,	
SIGNATUR	E:			
	Electronic Signature of Registered Ag	ent	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO O	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () Delete HARRISON, SHIRLEY 3380 NW 18TH PLACE LAUDERHILL, FL 33311	Title: () Chang Name: Address: City-St-Zip:	e () Addition	
Title: Name: Address: City-St-Zip:	VP () Delete JAMEISON, CAMESA 4500 BAYMEADOWS RD 76 JACKSONVILLE, FL 32217	Title: () Chang Name: Address: City-St-Zip:	e () Addition	
Name: Address:	JAMEISON, CÁMESA 4500 BAYMEADOWS RD 76	Name: Address: City-St-Zip:	e()Addition e()Addition	
Name: Address: City-St-Zip: Title: Name: Address:	JAMEISON, CÁMESA 4500 BAYMEADOWS RD 76 JACKSONVILLE, FL 32217 S () Delete BROWN, APRIL 770 SW 7TH STREET	Name: Address: City-St-Zip: Title: () Chang 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: SHIRLEY HARRISON P 03/20/2009