2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 8:00 am
Secretary of State
04-28-2008 90360 001 ****61.25

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1. Entity Name
KING'S WAY CHRISTIAN CENTER, INC.

Principal Place of Business	Mailing Address
2016 KISMET PARKWAY E CAPE CORAL, FL 33909 US	2016 KISMET PARKWAY E CAPE CORAL, FL 33909 US

04232008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0365081 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

LUCAS, MICHAEL J T
2016 KISMET PARKWAY E
CAPE CORAL, FL 33909

7. Name and Address of New Registered Agent

Name: Daniel Lumadue
Street Address (P.O. Box Number is Not Acceptable): 2016 Kismet Pkwy E
City: Cape Coral FL Zip Code: 33909

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D NOA, JOSE 2660 SOMERVILLE LOOP CAPE CORAL, FL 33991	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Thomas Watson 382 SE 2nd St Cape Coral FL 33990 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JEWETT, PATRICIA 3818 SW 5TH PLACE CAPE CORAL, FL 33904	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CHARITY, RON 2208 SE 1ST TERRACE CAPE CORAL, FL 33990	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Cesar Reina 13058 NW 5th PL Cape Coral FL 33993 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD LUCAS, MICHAEL J 3912 SE 10TH AVENUE CAPE CORAL, FL 33904	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ALI, RANDY 525 NW 25TH TERRACE CAPE CORAL, FL 33993	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Denise John 4631 SW 18th Ave Ft Myers, FL 33916 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LAMB, KEITH 136 NE 7TH AVENUE CAPE CORAL, FL 33909	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Anthony Frizziola 1826 SW 18th ST Cape Coral, FL 33991 — ☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 4-24-08 239-458-2700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #