

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000001252

**FILED**  
**Feb 17, 2011**  
**Secretary of State**

**Entity Name:** THE LAST DAY MINISTRY OF JESUS CHRIST INC.

**Current Principal Place of Business:**

499 NW GOD'S WAY  
FOUNTAIN, FL 32438

**New Principal Place of Business:**

**Current Mailing Address:**

499 NW GOD'S WAY  
FOUNTAIN, FL 32438

**New Mailing Address:**

**FEI Number:** 59-3176553

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KENT, WILLIAM D  
499 NW GOD'S WAY  
FOUNTAIN, FL 32438 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: KENT, WILLIAM D  
Address: 499 NW GOD'S WAY  
City-St-Zip: FOUNTAIN, FL 32438

Title: D  
Name: KENT, FAITH D  
Address: 477 NW GOD'S WAY  
City-St-Zip: FOUNTAIN, FL 32438

Title: D  
Name: KENT, HOPE C  
Address: 541 NW GOD'S WAY  
City-St-Zip: FOUNTAIN, FL 32438

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: WILLIAM D. KENT

D

02/17/2011

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

\_\_\_\_\_  
Date