

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2005 8:00 am
Secretary of State

04-15-2005 90063 019 *****70.00

DOCUMENT # N95000005515

1. Entity Name
KINGDOM LIFE MINISTRIES INTERNATIONAL, INC.



Principal Place of Business
**2004 BENEDICT RD
JACKSONVILLE, FL 32209**

Mailing Address
**P.O. BOX 9148
JACKSONVILLE, FL 32208 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03112005

Chg-NP

CR2E037 (10/03)

4. FEI Number
59-3334350

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SMITH-CLARK, DIANE
2004 BENEDICT RD
JACKSONVILLE, FL 32209**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Diane Clark

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-8-05

**Filing Fee is \$61.25
Due by May 1, 2005**

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**SD
GRIFFIN, WYONNA E
2263 W 18TH ST
JACKSONVILLE, FL 32209** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**TD
ROSS, SHAUN A
1751 E 26TH ST
JACKSONVILLE, FL 32206** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PCEO
SMITH CLARK, DIANE
1213 TURTLE CREEK DR N
JACKSONVILLE, FL 32218** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DV
AIKEN, THOMAS J
169 DIXIE LAKE ROAD
FOLKSTON, GA 31537** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**Secretary
Faye A. Battle
3653 Antiar Ridge Lane
Jacksonville FL 32218** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
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☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Diane Clark

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-8-05

Date

904 7658488

Daytime Phone #