

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 27, 2005 08:00 AM
Secretary of State

DOCUMENT # N96000006574

1. Entity Name
KENNETH L. SMITH, SR. MINISTRIES, INC.



Principal Place of Business
**2901 W OAKLAND PARK BLVD
SUITE B-16
OAKLAND PARK, FL 33311 US**

Mailing Address
**PO BOX 5143
FT LAUDERDALE, FL 33310-5143 US**



04122005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0712885

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**SMITH, KENNETH L SR.
2901 W. OAKLAND PARK BLVD.
STE B-14
FT. LAUDERDALE, FL 33311**

**DO NOT WRITE
IN THIS SPACE**

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 _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

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

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, KENNETH L SR. 5031 NW 15 ST. LAUDERHILL, FL 33313
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CUNNINGHAM, NATASHA 2770 SOMERSET DR., BLDG. R, #311 LAUDERHILL, FL 33313
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PEW-EASON, BARBARA 2051 NW 43 TERR., #201 LAUDERHILL, FL 33313
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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04/27/05-80119-023 61.25

**DO NOT WRITE
IN THIS SPACE**

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-15-05 954-735-2121

Date

Daytime Phone #