

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001301

FILED
Apr 28, 2009
Secretary of State

Entity Name: KINGDOM LIFE AND DOMINION CHURCH, INC.

Current Principal Place of Business:

3400 SW 69TH WAY
MIRAMAR, FL 33023

New Principal Place of Business:

7381 DAVIE ROAD EXT
DAVIE, FL 33024

Current Mailing Address:

PO BOX 551943
OPA LOCKA, FL 33055

New Mailing Address:

7381 DAVIE ROAD EXT
DAVIE, FL 33024

FEI Number: 65-0899141

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BISHOP, ROBERT
7560 NW 16TH STREET
PLANTATION, FL 33313 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: DS () Delete
Name: SCARLETT, DAZNETT
Address: 3138 S. UNIV. DR.
City-St-Zip: MIRAMAR, FL 33025

Title: DT () Delete
Name: WALKER, ANNETTE
Address: PO BOX 551943
City-St-Zip: CAROL CTY, FL

Title: D () Delete
Name: BISHOP, SHARON
Address: 3138 S. UNIV. DR
City-St-Zip: OPA LOCKA, FL 33056

Title: D () Delete
Name: WESTON, VALERIE
Address: 3138 S. UNIV. DR
City-St-Zip: MIRAMAR, FL 33025

Title: PPD () Delete
Name: BISHOP, ROBERT
Address: PO BOX 551943
City-St-Zip: CAROL CTY, FL

Title: D () Delete
Name: THOMPSON, RAY
Address: PO BOX 551943
City-St-Zip: CAROL CTY, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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: ROBERT BISHOP

PPD

04/28/2009

Electronic Signature of Signing Officer or Director

Date