

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000011472

**Entity Name:** KINGDOM LIFE MINISTRIES OF GAINESVILLE, INC.

**Current Principal Place of Business:**

902 SE 10TH TERRACE  
GAINESVILLE, FL 32601-8100

**Current Mailing Address:**

902 SE 10TH TERRACE  
GAINESVILLE, FL 32601-8100 US

**FEI Number:** 20-3743553

**Certificate of Status Desired:** Yes

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

BRADLEY, WINSTON J  
6215 NW 56TH LN  
GAINESVILLE, FL 32653-3118 US

*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

**Officer/Director Detail :**

Title            PRESIDENT  
Name            RICHARDSON, BEATRICE KATHY L  
                    PASTOR  
Address        902 SE 10TH TERRACE  
City-State-Zip: GAINESVILLE FL 32601-8100

Title            VP  
Name            BUTLER, NEIL ASST. PASTOR  
Address        902 SE 10TH TERRACE  
City-State-Zip: GAINESVILLE FL 32601-8100

Title            TREASURER  
Name            WILLIAMS, EVELYN ELDER  
Address        902 SE 10TH TERRACE  
City-State-Zip: GAINESVILLE FL 32601-8100

Title            VP  
Name            BRADLEY, WINSTON J ASST. PASTOR  
Address        902 SE 10TH TERRACE  
City-State-Zip: GAINESVILLE FL 32601-8100

Title            SECRETARY  
Name            WILLIAMS, VERONICA L  
Address        902 SE 10TH TERRACE  
City-State-Zip: GAINESVILLE FL 32601-8100

*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:** VERONICA L. WILLIAMS

**SECRETARY**

**04/23/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date