

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000005291

**Entity Name:** KINGDOM LIFE NOW, INC.

**Current Principal Place of Business:**

1500 BEVILLE RD PMB 381  
DAYTONA BEACH, FL 32114

**Current Mailing Address:**

1500 BEVILLE RD  
PMB 381  
DAYTONA BEACH, FL 32114 US

**FEI Number:** 59-3602307

**Certificate of Status Desired:** No

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

TOLLESON, KATHLEEN  
124 MARSH WREN COURT  
DAYTONA BEACH, FL 32119 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            TOLLESON, KATHLEEN STEELE DR.  
Address        124 MARSH WREN COURT  
City-State-Zip: DAYTONA BEACH FL 32119

Title            MRS  
Name            TOLLESON, KATHY  
Address        124 MARSH WREN COURT  
City-State-Zip: DAYTONA BEACH FL 32119

Title            VP, /SECRETARY  
Name            SMITH, ARLENE MARIE  
Address        1063 LEWIS ROBERTS ROAD  
City-State-Zip: JEFFERSON GA 30549

Title            TREASURER  
Name            NELSON, MICHAEL JAMES  
Address        634 HUNTINGTON AVE  
City-State-Zip: WINTER PARK FL 32789

Title            EXECUTIVE ASSISTANT  
Name            MAXEY, JORDAN NOEL  
Address        781 81ST PLACE S  
City-State-Zip: BIRMINGHAM AL 35206-3961

*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:** KATHLEEN TOLLESON

**PRESIDENT**

**01/31/2024**

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

\_\_\_\_\_  
Date