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Apr 14 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **707058** (4)
1. Corporation Name

DELIVERANCE MIRACLE REVIVAL CENTER INC

Principal Place of Business 8401 NE 77TH LANE P.O. BOX 268 GAINESVILLE FL 32602	Mailing Address 8401 NE 77TH LANE P.O. BOX 268 GAINESVILLE FL 32602
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3. Date Incorporated or Qualified

03/27/1964

4. FEI Number

59-1269231

Applied For

Not Applicable

2. Principal Place of Business 21 1817 SE Hawthorne Rd Suite, Apt. #, etc. 22 City & State 23 Gainesville, FL Zip 24 32644 Country 25	2a. Mailing Address 26 P.O. Box 268 Suite, Apt. #, etc. 27 City & State 28 Gainesville FL Zip 29 32601 Country 30
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

Name and Address of Current Registered Agent

**LAKE, CURTIS JR.
8401 N.E. 77TH LANE
GAINESVILLE FL 32601**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	LAKE, CURTIS JR.	
STREET ADDRESS	8401 N.E. 77TH LANE	
CITY-ST-ZIP	GAINESVILLE FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	LAKE, CURTIS III	
STREET ADDRESS	8401 N.E. 77TH LANE	
CITY-ST-ZIP	GAINESVILLE FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	GANEY, ANNIE H	
STREET ADDRESS	21515 NW 205TH STREET	
CITY-ST-ZIP	HIGH SPRINGS FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	CARTER, ALBERT JR.	
STREET ADDRESS	1611 S.E. 12TH AVE.	
CITY-ST-ZIP	GAINESVILLE FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	CLAY, RAYMOND R SR	
STREET ADDRESS	276 #4 CORY VILLAGE	
CITY-ST-ZIP	GAINESVILLE FL 32603	
TITLE	D	<input type="checkbox"/> DELETE
NAME	CLAY, VEDRIA	
STREET ADDRESS	2511 NE SUNSET DRIVE	
CITY-ST-ZIP	WINTER HAVEN FL 33881	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  **4/10/98** (352)377-7024

CR2E037 (10/97)