2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007952

FILED May 01, 2005 Secretary of State

Entity Name: MT MORIAH FAITH DELIVERANCE HOLINESS CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business: 5888 NW US HIGHWAY 41 1139 WEBSTER DRIVE LAKE CITY, FL 32055 PENSACOLA, FL 32505 **Current Mailing Address: New Mailing Address:** 1002 KEARNEY DR P.O. BOX 17645 PENSACOLA, FL 32505 PENSACOLA, FL 32522 FEI Number: 35-2214423 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LINDSEY-SMITH, YVETTE PASTOR 1002 KEARNEY DRIVE PENSACOLA, FL 32505 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete LINDSEY-SMITH, YVETTE L P/T/S/C LINDSEY-SMITH, YVETTE L P/T/S/C Name: Name: Address: 1002 KEARNEY DR Address: 1139 WEBSTER DRIVE City-St-Zip: PENSACOLA, FL 32505 City-St-Zip: PENSACOLA, FL 32505 Title: () Delete Title: () Change () Addition JOHNSON, WILLIE J V/T/C Name: Name: Address: 8669 NW 34 LOOP Address: City-St-Zip: JASPER, FL 32052 City-St-Zip: Title: () Delete Title: () Change () Addition LINDSEY-BOUTWELL, MARY C C Name: Name: 1002 KEARNEY DR Address: Address: City-St-Zip: PENSACOLA, FL 32505 City-St-Zip: Title: () Delete Title: (X) Change () Addition LINDSEY, VICTOR D C Name: Name: MCGEE, TERESA D C 4502 CHARMONTE WAY Address: Address: 1002 KEARNEY DRIVE City-St-Zip: PENSACOLA, FL 32505 City-St-Zip: PENSACOLA, FL 32505

I hereby certify that the information supplied with this filing does not qualify for the 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 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: TERESA MCGEE D 05/01/2005