

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009458

FILED
Aug 17, 2006
Secretary of State

Entity Name: CHRISTIAN DELIVERANCE OUTREACH MINISTRY, INC. II

Current Principal Place of Business:

3510 WEST WILSON STREET
JACKSONVILLE, FL 32209

New Principal Place of Business:

2815 RED LION SQUARE
WINTER PARK, FL 32792

Current Mailing Address:

1007 SOUTH SANFORD AVENUE
SANFORD, FL 32771

New Mailing Address:

2815 RED LION SQUARE
WINTER PARK, FL 32792

FEI Number: 83-0388614 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

ROBINSON, SUSIE PASTOR
3510 WEST WILSON AVENUE
JACKSONVILLE, FL 32209 US

Name and Address of New Registered Agent:

MORROW, SUSIE PASTOR
2815 RED LION SQUARE
WINTER PARK, FL 32792 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: PASTOR SUSIE MORROW

08/17/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ROBINSON, SUSIE
Address: 3510 WEST WILSON STREET
City-St-Zip: JACKSONVILLE, FL 32209

Title: D () Delete
Name: PARKS, RICKEY
Address: 1000 E 9TH STREET
City-St-Zip: SANFORD, FL 32771

Title: D () Delete
Name: PARKS, NETTIE
Address: 1000 E 9TH STREET
City-St-Zip: SANFORD, FL 32771

Title: D (X) Delete
Name: COBARRIS, GINA
Address: POST OFFICE BOX 1674
City-St-Zip: SANFORD, FL 32772

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MORROW, SUSIE
Address: 2815 RED LION SQUARE
City-St-Zip: WINTER PARK, FL 32792

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 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: RICKEY PARKS

D

08/17/2006

Electronic Signature of Signing Officer or Director

Date