

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007368

FILED
Feb 26, 2011
Secretary of State

Entity Name: GOD OF DELIVERANCE BAPTIST MINISTRIES, INC.

Current Principal Place of Business:

16012 NW 27 AVE
MIAMI GARDENS, FL 33054

New Principal Place of Business:

Current Mailing Address:

16340 NW 18TH PLACE
MIAMI GARDENS, FL 33054

New Mailing Address:

FEI Number: 51-0591730

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ATHOURISTE, LUC PASTOR
16340 NW 18TH PLACE
MIAMI GARDENS, FL 33054 US

Name and Address of New Registered Agent:

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:

Title: DP
Name: ATHOURISTE, LUC
Address: 16340 NW 18TH PLACE
City-St-Zip: MIAMI GARDENS, FL 33054

Title: DV
Name: GRESSEAU, IRMMACULA
Address: 1251 NE 150 ST
City-St-Zip: N. MIAMI, FL 33167

Title: DV
Name: JOSEPH, CYNTHIA
Address: 5214 NW 190 ST
City-St-Zip: MIAMI, FL 33055

Title: DT
Name: ATHOURISTE, LEA
Address: 16340 NW 18 PL
City-St-Zip: MIAMI GARDENS, FL 33054

Title: DS
Name: SURIN, ANTOINE
Address: 1765 NW 122 ST
City-St-Zip: MIAMI, FL 33167

Title: DS
Name: EDMOND, YVE
Address: 16012 NW 27 AVE
City-St-Zip: MIAMI GARDEN, FL 33054

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: LUC ATHOURISTE

PAST

02/26/2011

Electronic Signature of Signing Officer or Director

Date