

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 13, 2009
Secretary of State**

DOCUMENT# N26026

Entity Name: FAITH ASSEMBLY CHURCH OF DELIVERANCE, INC.

Current Principal Place of Business:

2990 NW 5TH ST
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

761 NW 17 COURT
PO BOX 1803
POMPANO BCH, FL 33061

New Mailing Address:

FEI Number: 65-0047550 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WATKINS, INEZ
1720 NW SECOND AVENUE
POMPANO BEACH, FL 33060 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: P () Delete
Name: BELL, MARK,
Address: 761 NW 17 COURT
City-St-Zip: POMPANO BEACH, FL

Title: ST () Delete
Name: BELL, KATHERINE
Address: 761 NW 17TH CT
City-St-Zip: POMPANO BEACH, FL

Title: D () Delete
Name: HUDSON, CLARENCE
Address: 433 SW 2ND ST
City-St-Zip: POMPANO BEACH, FL 33060

Title: D () Delete
Name: THOMPSON, ERNEST
Address: 620 N.W. 15TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33311

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: MARK BELL

P

01/13/2009

Electronic Signature of Signing Officer or Director

Date