2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **N33724**

DELIVERANCE CENTER - OUTREACH MINISTRY FOR CHRIS T. INC.



Aug 04, 2003 8:00 am Secretary of State 04-30-2003 90165 023 ****71.00

Principal Place of Business 3090 N.W. 7TH STREET FORT LAUDERDALE FL 33311 US

2. Principal Place of Business

2731 N.W. 26TH AVENUE FORT LAUDERDALE FL 33311

Suite, Apt. #, etc.

City & State

Zip

Mailing Address 3090 N.W. 7TH STREET FORT LAUDERDALE FL 33311

Zip

3. Mailing Address Suite, Apt, #, etc.

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☐ CHECK HERE IF MAKING CHANGES

City & State 4. FEI Number 65-0141478

\$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent

Country

MCLANE, ROSA B.

Country

			-		•	-			
Street Address	P.O. B	ox Nun	ber	is I	Not	Acc	eptab	ole)	
									_

City Zip Code

8.	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.	I am familiar with, a	and accept
	the obligations of registered agent.		

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

(NOTE: Registered Agent signature required when reinstating)

Applied For

Not Applicable

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing

\$5.00 May Be

Make Check Payable to

After September 10, 2003, min will be \$236.25		Trust Fund Contribution.		Added to Fees	Fiorida Depa	Florida Department of State		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD MCLANE, ROSA B. 2731 N.W. 26TH AVENUE FT. LAUDERDALE FL	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	☐ Addition	
TITLE NAME STREET ADDRESS GITY-ST-ZIP	VSD MCLANE, ANTHONY D. 2731 N.W. 26TH AVENUE FT. LAUDERDALE FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP	BRYANT, CAREY R 2611 NW 56TH AVE. LAUDERHILL FL 33313	Delete-	NAME STREET ADDRESS CITY-ST-ZIP	2511 N.W. 5 LAUDERHILL	SLAAVE.		Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP	108UA C 3140 SW. 1 MAKCATES		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	NAME STREET ADDRESS CITY-ST-ZIP	LEVON ERSO 2081 N.W. L LAUDERHSLL	- Davic +3 Terrac +1.33313		Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	NAME STREET ADDRESS CITY_ST_7IP	1436 N.W.	STREE	☐ Change	- Addition	

12. 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 report or supplemental 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 higher empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.