

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N50295

**FILED**  
**Feb 25, 2011**  
**Secretary of State**

**Entity Name:** FAITH IN ACTION DELIVERANCE MINISTRIES & EDUCATION, CENTER, INC.

**Current Principal Place of Business:**

18190 S.W. 102ND AVENUE  
MIAMI, FL 33157

**New Principal Place of Business:**

**Current Mailing Address:**

18190 S.W. 102ND AVENUE  
MIAMI, FL 33157

**New Mailing Address:**

**FEI Number:** 65-0345340

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FERGUSON, BETTIE  
11960 SOUTHWEST 173RD STREET  
MIAMI, FL 33177 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: CEO  
Name: FERGUSON, BETTIE  
Address: 11960 SW 173 STREET  
City-St-Zip: MIAMI, FL 33177

Title: VP  
Name: FERGUSON, CHARLES  
Address: 11960 SW 173 ST  
City-St-Zip: MIAMI, FL 33177

Title: S  
Name: NELSON, SONYA L  
Address: 12340 SW 212 ST  
City-St-Zip: MIAMI, FL 33177

Title: T  
Name: HARRIS, SHARON  
Address: 1261 SE 27 ST  
City-St-Zip: HOMESTEAD, FL 33035

Title: MD  
Name: HICKSON, MARTHA  
Address: 10285 SW 176 ST  
City-St-Zip: MIAMI, FL 33157

Title: ED  
Name: THOMAS, SHIRLEY  
Address: 10745 SW 107 CT  
City-St-Zip: MIAMI, FL 33157

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: BETTIE M. FERGUSON

CEO

02/25/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date