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Jul 16 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morikam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N94000001193 (1)

1. Corporation Name

TRUE DELIVERANCE FELLOWSHIP, INC.



Principal Place of Business

Mailing Address

618 19TH STREET EAST
BRADENTON FL 34208

618 19TH STREET EAST
BRADENTON FL 34208

3. Date Incorporated or Qualified

03/07/1994

4. FEI Number

65-0500199

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name TRICE, RAYMOND D.

82 Street Address (P.O. Box Number is Not Acceptable)

83 5580 - Fountain Lake Cir. #114

84 City Bradenton

FL

85 Zip Code 34207

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP ☐ DELETE

NAME TRICE, RAYMOND D
STREET ADDRESS 618 19TH STREET EAST
CITY-ST-ZIP BRADENTON FL 34208

TITLE DV ☐ DELETE

NAME BENNETT, CARLTON
STREET ADDRESS 3227 6TH AVE. WEST
CITY-ST-ZIP PALMETTO FL 34221

TITLE DST ☐ DELETE

NAME TRICE, TINA T
STREET ADDRESS 618 19TH STREET EAST
CITY-ST-ZIP BRADENTON FL 34208

TITLE ☐ DELETE

NAME New officer
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME New officer
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME New officer
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DP ☒ Change ☐ Addition

1.2 NAME TRICE, RAYMOND D.
1.3 STREET ADDRESS 5580 - Fountain Lake Cir. #114
1.4 CITY-ST-ZIP BRADENTON, FLA. 34207

2.1 TITLE DV ☐ Change ☐ Addition

2.2 NAME BENNETT, CARLTON
2.3 STREET ADDRESS 3227 6TH AVE. WEST
2.4 CITY-ST-ZIP PALMETTO, FL 34221

3.1 TITLE DST ☒ Change ☐ Addition

3.2 NAME TRICE, TINA T.
3.3 STREET ADDRESS 5580 - FOUNTAIN LAKE CIR. #114
3.4 CITY-ST-ZIP BRADENTON, FLA 34207

4.1 TITLE DTR ☒ Change ☒ Addition

4.2 NAME Spencer, Lora Ann
4.3 STREET ADDRESS 1555 21st St. E.
4.4 CITY-ST-ZIP Bradenton, FLA. 34208

5.1 TITLE DS ☒ Change ☒ Addition

5.2 NAME Haygood, Harriet
5.3 STREET ADDRESS 6926 9th Ct. E.
5.4 CITY-ST-ZIP SARASOTA, FLA 34243

6.1 TITLE DTR ☒ Change ☒ Addition

6.2 NAME RANDALL, JOYCE
6.3 STREET ADDRESS P.O. Box 1566
6.4 CITY-ST-ZIP Palmetto, FLA 34220

14. 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 annual report or supplemental annual 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 trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Raymond D. Trice

4/28/98

941-739-5750

CR2E037 (10/97)