


**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 12, 2006 8:00 am**  
**Secretary of State**

04-12-2006 90097 022 \*\*\*\*61.25

DOCUMENT # N00000001858					
1. Entity Name DELIVERANCE TEMPLE FIRST BORN CHURCH, INC.					
Principal Place of Business 5715 HARDAWAY ROAD CHATTAHOOCHEE, FL 32324		Mailing Address P.O. BOX 354 CHATTAHOOCHEE, FL 32324			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>59-3295441</b>	
5. Certificate of Status Desired <input type="checkbox"/>				<input type="checkbox"/> \$8.75 Additional Fee Required Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
DEAS, TITUS B JR. 225 QUAIL ROAST DRIVE QUINCY, FL 32352			Name Street Address (P.O. Box Number is Not Acceptable) City FL 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, and accept the obligations of registered agent.					
SIGNATURE <u>Titus B. Deas Jr.</u>				DATE <u>3/31/06</u>	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b> <b>Make check payable to Florida Department of State</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD <input type="checkbox"/> Delete	TITLE	PD <input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	DEAS, TITUS B JR.	NAME	Titus B. Deas, Jr.		
STREET ADDRESS	225 QUAIL ROAST DRIVE	STREET ADDRESS	225 Quail Roast Dr.		
CITY-ST-ZIP	TALLAHASSEE, FL 32308	CITY-ST-ZIP	Quincy, FL 32352		
TITLE	VD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	DUPREE, PAMELLA	NAME			
STREET ADDRESS	2855 APALACHEE PKWY C142	STREET ADDRESS			
CITY-ST-ZIP	TALLAHASSEE, FL 32308	CITY-ST-ZIP			
TITLE	SD <input checked="" type="checkbox"/> Delete	TITLE	SD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	HOUSE, AMANDA	NAME	Carol Vicks		
STREET ADDRESS	2416 JACKSON BLUFF ROAD #108	STREET ADDRESS	1203 Pine Circle SouthWest		
CITY-ST-ZIP	TALLAHASSEE, FL 32304	CITY-ST-ZIP	Cairo, Ga 39828		
TITLE	TD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	WILLIAMS, PENNY R	NAME			
STREET ADDRESS	325 COCHRAN ROAD	STREET ADDRESS			
CITY-ST-ZIP	CHATTAHOOCHEE, FL 32324	CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE <u>Penny R. Williams</u>		SIGNATURE <u>Penny R. Williams</u>		DATE <u>3/31/06</u> (850) 442-4617	
SIGNATURE AND TYPED OR PRINTED NAME OF _____		SIGNATURE AND TYPED OR PRINTED NAME OF _____		DATE _____ Daytime Phone # _____	