


2006 NQT-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 HARDWAY 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 59-3295441 | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | | | 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 <div style="display: flex; justify-content: space-between;"> FL Zip Code </div> | |
| 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><i>Titus B. Deas Jr.</i></u> 3/31/06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> | | | | | |
| Filing Fee is \$61.25 Due by May 1, 2006 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | | \$5.00 May Be Added to Fees | |
| Make check payable to Florida Department of State | | | | | |
| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PD <input type="checkbox"/> Delete DEAS, TITUS B JR. 225 QUAIL ROAST DRIVE TALLAHASSEE, FL 32303 | TITLE NAME STREET ADDRESS CITY - ST - ZIP | PD <input type="checkbox"/> Change <input type="checkbox"/> Addition Titus B. Deas, Jr. 225 Quail Roast Dr. Quincy, FL 32352 | | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | VD <input type="checkbox"/> Delete DUPREE, PAMELLA 2855 APALACHEE PKWY C142 TALLAHASSEE, FL 32308 | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | SD <input checked="" type="checkbox"/> Delete HOUSE, AMANDA 2416 JACKSON BLUFF ROAD #108 TALLAHASSEE, FL 32304 | TITLE NAME STREET ADDRESS CITY - ST - ZIP | SD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Carol Vicks 1203 Pine Circle South West Cairo, Ga 39828 | | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | TD <input type="checkbox"/> Delete WILLIAMS, PENNY R 325 COCHRAN ROAD CHATTAHOOCHEE, FL 32324 | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | | |
| 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><i>Penny R Williams</i></u> 3/31/06 (850) 442-4617 <small>SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR</small> | | | | | |