

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001506

Entity Name: THE SANCTUARY OF THE LORD DELIVERANCE MINISTRY, INC.**FILED**
Apr 20, 2018
Secretary of State
CC8300088976**Current Principal Place of Business:**2331 N.W 27TH AVENUE
FTLAUDERDALE, FL 33311**Current Mailing Address:**2331 NW 27TH AVENUE
FTLAUDERDALE, FL 33311 US**FEI Number: 65-0991550****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**HANNOR, ANNIE
2331 NW 27TH AVENUE
FTLAUDERDALE, FL 33311 US*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**Officer/Director Detail :**

Title	P
Name	HANNOR, ANNIE
Address	2331 NW 27TH AVENUE
City-State-Zip:	FTLAUDERDALE FL 33311

Title	ED
Name	HALL, ALBERTA
Address	3151 NW 16TH ST.
City-State-Zip:	FT. LAUDERDALE FL 33311

Title	T
Name	BROWN, TAMETRIA
Address	2331 NW 27TH AVENUE
City-State-Zip:	FTLAUDERDALE FL 33311

Title	VP
Name	PAYNE, BRUCE
Address	16981 NE 8TH CT
City-State-Zip:	MIAMI FL 33162

Title	D
Name	WRIGHT, LEANETTA
Address	2750 NW 44TH ST #113
City-State-Zip:	OAKLAND PARK FL 33309

Title	D
Name	HAMILTON, CALVIN
Address	209 NE 33 ST
City-State-Zip:	OAKLAND PARK FL 33334

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: ANNIE HANNOR**PRESIDENT****04/20/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date