

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000005038

**Entity Name:** HOLY GHOST FROM HEAVEN DELIVERANCE CHURCH OF  
JESUS CHRIST # 2, INCORPORATED

**Current Principal Place of Business:**

3409 N. 29TH STREET  
SUITE B  
TAMPA, FL 33605

**Current Mailing Address:**

3302 N 34TH STREET  
TAMPA, FL 33605 US

**FEI Number: 80-0386390**

**Certificate of Status Desired: Yes**

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

DUBERRY, LEONA PASTOR  
3302 N. 34TH ST  
TAMPA, FL 33605 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: PASTOR LEONA DUBERRY**

**04/09/2014**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PPO  
Name DUBERRY, LEONA PASTOR  
Address P.O. BOX 402  
City-State-Zip: JENININGS FL 32053

Title BM  
Name LEE, SHIRLEY ATRES/SC  
Address 3302 N. 34TH ST  
City-State-Zip: TAMPA FL 33605

Title OTHER  
Name DREW, EMMA  
Address 3409 N. 29TH STREET  
SUITE B  
City-State-Zip: TAMPA FL 33605

Title AP  
Name SMITH, ERNESTINE  
Address 904 HERITAGE PALM CT  
APT 101  
City-State-Zip: TAMPA FL 33617

Title E  
Name MURPHY, CUBIE  
Address 928 MARYLAND AVE  
City-State-Zip: TAMPA FL 33605

*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: PASTOR LEONA DUBERRY**

**PASTOR**

**04/09/2014**

Electronic Signature of Signing Officer/Director Detail

Date