

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000006190

**Entity Name:** CHURCH OF DELIVERANCE THROUGH THE BLOOD OF JESUS #2, INC.**FILED**  
**Apr 25, 2015**  
**Secretary of State**  
**CC1791143891****Current Principal Place of Business:**7437 SW CR 143  
JASPER, FL 32052**Current Mailing Address:**1350 NW 183 ST  
MIAMI, FL 33169 US**FEI Number: 46-3168072****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**TUFF, FREDDY LEE PRESIDENT  
1350 NW 183 ST.  
MIAMI, FL 33169 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: FREDDY L. TUFF****04/25/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PTD
Name	FREDDY, TUFF L SR.
Address	1350 NW 183 ST.
City-State-Zip:	MIAMI FL 33169

Title	VSD
Name	GINA, TUFF
Address	1350 NW 183 ST
City-State-Zip:	MIAMI FL 33169

Title	TRUSTEE
Name	GLENDA, WASHINGTON L
Address	5821 N.W. 7 AVE
City-State-Zip:	MIAMI FL 33127

Title	TRUSTEE
Name	ALOYSIUS, BAPTISTE
Address	1021 NW 23 AVE.
City-State-Zip:	FT. LAUDERDALE FL 33311

Title	D
Name	COSMO, JORDAN M JR.
Address	17013 NW 53 AVE
City-State-Zip:	MIAMI FL 33055

Title	D
Name	BAILEY, MONIQUE
Address	1350 NW 183 ST
City-State-Zip:	MIAMI FL 33169

Title	TRUSTEE
Name	RACOLE, HENRY
Address	1350 N.W. 183 ST.
City-State-Zip:	MIAMI FL 33169

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: GINA TUFF****VICE-PRESIDENT****04/25/2015**

Electronic Signature of Signing Officer/Director Detail

Date