

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000006053

**Entity Name:** DELIVERANCE OUTREACH MINISTRIES OF OCALA, INC.**Current Principal Place of Business:**8284 SW 59TH AVE  
OCALA, FL 34476**Current Mailing Address:**8284 SW 59TH AVE  
OCALA, FL 34476 US**FEI Number: 47-4374894****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**OLIVER, TYRONE E SR.  
8284 SW 59TH AVE  
OCALA, FL 34476 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:** TYRONE E OLIVER

03/06/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	DP
Name	OLIVER, TYRONE E
Address	8284 SW 59TH AVE
City-State-Zip:	OCALA FL 34476

Title	DSVP
Name	OLIVER, EMILY
Address	8284 SW 59TH AVE
City-State-Zip:	OCALA FL 34476

Title	DIRECTOR
Name	OLIVER, TYANGUS D
Address	821 NE 35TH TERR
City-State-Zip:	OCALA FL 34470

Title	SECRETARY / TREASURY
Name	MILLER, FELICIA
Address	7449 HEMLOCK RD
City-State-Zip:	OCALA FL 34472

Title	CEO
Name	OLIVER, TYRONE EUGENE SR.
Address	8284 SW 59TH AVE
City-State-Zip:	OCALA FL 34476

*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:** TYRONE OLIVER

CEO

03/06/2024

Electronic Signature of Signing Officer/Director Detail

Date