

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N33724

**FILED  
Mar 02, 2017  
Secretary of State  
CC0030739696**

**Entity Name:** DELIVERANCE CENTER - OUTREACH MINISTRY FOR CHRIST, INC.

**Current Principal Place of Business:**

3090 NW 7 ST.  
FORT LAUDERDALE, FL 33311

**Current Mailing Address:**

3090 NW 7 ST.  
FORT LAUDERDALE, FL 33311 US

**FEI Number: 65-0141478**

**Certificate of Status Desired: No**

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

MCLANE, ROSA B  
2731 N.W. 26TH AVENUE  
FORT LAUDERDALE, 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           PTD  
Name           MCLANE, ROSA B.  
Address        2731 N.W. 26TH AVENUE  
City-State-Zip: FT. LAUDERDALE FL 33311

Title           S  
Name           MCLANE, ANTHONY D  
Address        2731 N.W. 26TH AVENUE  
City-State-Zip: FT. LAUDERDALE FL 33311

Title           VSD  
Name           MCLANE, ANTHONY D  
Address        2731 N.W. 26TH AVENUE  
City-State-Zip: FT. LAUDERDALE FL 33311

*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: ROSA B. MCLANE**

**PTD**

**03/02/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date