

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

DOCUMENT# N94000003456

**FILED**  
**Feb 27, 2017**  
**Secretary of State**  
**CC4398855395**

**Entity Name:** TABERNACLE OF DELIVERANCE HOLINESS CHURCH, INC.

**Current Principal Place of Business:**

14209 NE 21ST AVENUE ROAD  
SPARR, FL 32192

**Current Mailing Address:**

POST OFFICE BOX 188  
SPARR, FL 32192

**FEI Number: 59-3258446**

**Certificate of Status Desired: Yes**

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

VAUGHNS, VINCENT W  
14209 NE 21ST AVENUE ROAD  
SPARR, FL 32192 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 PD  
Name VINCENT W. VAUGHNS  
Address 14209 N.E. 21ST AVE. RD.  
City-State-Zip: SPARR FL 32192

Title VPD  
Name HERBERT MAE VAUGHNS  
Address 14209 N.E. 21ST AVE. RD.  
City-State-Zip: SPARR FL 32192

Title D  
Name VAUGHNS, KETURAH  
Address 14209 NE 21ST AVENUE ROAD  
City-State-Zip: SPARR FL 32192

*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: VINCENT W. VAUGHNS**

**PRESIDENT**

**02/27/2017**

Electronic Signature of Signing Officer/Director Detail

Date