

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

DOCUMENT# N99000006957

Entity Name: NEW BIRTH DELIVERANCE MINISTRY, INC.

Current Principal Place of Business:

412 N. MASSACHUSETTS
LAKELAND, FL 33801

Current Mailing Address:

415 MONTGOMERY AVE
LAKELAND, FL 33801 US

FEI Number: 59-3499678

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LASTER, LILLIE M
415 MONTGOMERY AVE.
LAKELAND, FL 33801 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 PRESIDENT, CEO
Name LASTER, LILLIE M
Address 415 MONTGOMERY AVE
City-State-Zip: LAKELAND FL 33801

Title VP, SECRETARY
Name SOPHIA, AUSTIN
Address 415 MONTGOMERY AVE
City-State-Zip: LAKELAND FL 33801

Title CHAIRMAN
Name JONES, DAVID
Address 415 MONTGOMERY AVE
City-State-Zip: LAKELAND FL 33801

Title DIRECTOR
Name JONES, DORSELL
Address 415 MONTGOMERY AVE
City-State-Zip: LAKELAND FL 33801

Title VC
Name JONES, KADEEM
Address 415 MONTGOMERY AVE
City-State-Zip: LAKELAND FL 33801

Title OFFICER
Name JONES, DAKEEM
Address 415 MONTGOMERY AVE
City-State-Zip: LAKELAND FL 33801

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: LILLIE LASTER

P/CEO

07/08/2015

Electronic Signature of Signing Officer/Director Detail

Date