2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

Apr 14, 2006 8:00 am Secretary of State **DOCUMENT #704989** 04-14-2006 90152 011 ****66.25 MOUNT NEBO FAITH DELIVERANCE CHURCH, INC. Mailing Address Principal Place of Business 4141 SW 28 ST HOLLYWOOD, FL 33023 4631 S.W. 26TH STREET **UUUTHHUU** US WEST PARK, FL 33023 2. Principal Place of Business Mailing Address 4141 S.W. Suite, Apt. #, etc Suite, Apt. #, etc. 02232006 Chg-NP CR2E037 (11/05) 4. FEI Number 59-3234479 Applied For City & State Not Applicable \$8.75 Additional Country 5. Certificate of Status Desired Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MCDONALD, CALVIN K 4141 S.W. 28TH STREET HOLLYWOOD, FL 33023 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Make check payable to 9. Election Campaign Financing \$5.00 May Be Filing Fee is \$61.25 Florida Department of State Trust Fund Contribution Due by May 1, 2006 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Addition PD TITLE TITLE **D**elete NAME MCDONALD, CALVIN K NAME 4141 S.W. 28TH STREET STREET ADDRESS STREET ADDRESS 33023 CITY-ST-ZIP HOLLYWOOD, FL 33023 CITY-ST-7/P VD TITLE Change ☐ Addition TITLE Delete MCDONALD, RUTHIE B NAME NAME STREET ADDRESS 4141 S.W. 28TH STREET STREET ADDRESS HOLLYWOOD, FL 33023 CITY-ST-ZIP CITY-ST-ZIP SD ☐ Delete TITLE ☐ Change ■ Addition TITLE MIKE, WILLIE MAE NAME NAME 3416 HIBISCUS PLACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HOLLYWOOD, FL 33023 CITY-ST-ZIP TD Change ☐ Addition TITLE ☐ Delete ĦΠF BROWN, BETTY NAME NAME STREET ADDRESS STREET ADDRESS 4402 S.W. 28TH STREET HOLLYWOOD, FL 33023 CITY-ST-ZIP CITY-SI-ZIP TITLE ☐ Delete TITLE Change Addition BROWN, WALTER T NAME NAME STREET ADDRESS **4402 SW 28 STREET** STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD, FL 33023 Change ☐ Addition ☐ Delete NT! F **CUMMINGS, ETHEL** NAME STREET ADDRESS 1610 S 29 AVENUE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZP HOLLYWOOD, FL 33020

12. I hereby certify that the information supplied with this filting does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: .

FILED