2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#710665

FILED Jul 03, 2012 Secretary of State

Entity Name: WINGS OF DELIVERANCE, INC.

Current Principal Place of Business: New Principal Place of Business:

1714 SW FIRST PLACE CAPE CORAL, FL 33991

Current Mailing Address: New Mailing Address:

PO BOX 27414 CLEVELAND, OH 44127

FEI Number: 23-7426368 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

THOMAS MCLAIN IV

5900 TOWNSEND RD

5900 TOWNSEND RD

140 (200 N) (11 LE FL 200 A4 LIC)

JACKSONVILLE, FL 32244 US JACKSONVILLE, FL 32244 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: THOMAS L MCLAIN IV 07/03/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Γitle: PRES

Name: WILLIAMS, BISHOP CALVIN JR

Address: PO BOX 0833 City-St-Zip: JACKSON, MS 39205

Title: VP

Name: MCLAIN, THOMAS L III
Address: 9820 UNION AVENUE
City-St-Zip: CLEVELAND, OH 44105

Title:

Name: MCLAIN, LAVERNE D Address: 9820 UNION AVENUE City-St-Zip: CLEVELAND, OH 44105

Title:

 Name:
 MCLAIN, EBONY M

 Address:
 2201 W 93RD ST

 City-St-Zip:
 CLEVELAND, OH 44102

Title:

Name: DIAMOND, GERALDINE Address: 25451 N LAKELAND BLVD #107B

City-St-Zip: EUCLID, OH 44132

Title: [

Name: HOCKETT, BRENDA
Address: 3502 BERKELEY ROAD

City-St-Zip: CLEVELAND HEIGHTS, OH 44118

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: THOMAS L MCLAIN III VP 07/03/2012