

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720942

FILED
Apr 02, 2008
Secretary of State

Entity Name: FAITH OF DELIVERANCE CHURCH, HOUSE OF PRAISE, INC.

Current Principal Place of Business:

2955 GOODRICH AVE
P.O. BOX 2732
SARASOTA, FL 34230 US

New Principal Place of Business:

2955 GOODRICH AVE
SARASOTA, FL 34234 US

Current Mailing Address:

2955 GOODRICH AVE
P.O. BOX 2732
SARASOTA, FL 34230

New Mailing Address:

2955 GOODRICH AVE
SARASOTA, FL 34234 US

FEI Number: 65-0058900

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JENKINS, BETTY
2955 GOODRICH AVE
SARASOTA, FL 34234 US

Name and Address of New Registered Agent:

JENKINS, IRA E P
2955 GOODRICH AVE
SARASOTA, FL 34234 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: IRA E.JENKINS

04/02/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: LEVERETT, PAM
Address: HWY 280 W. PO BOX 282
City-St-Zip: AMERICUS, GA 31709

Title: T () Delete
Name: DICKNS, GERVAL
Address: 1010 37TH AVE EAST
City-St-Zip: BRANDENTON, FL 32408

Title: P () Delete
Name: JENKINS, BETTY,
Address: 2955 GOODRICH AVE
City-St-Zip: SARASOTA, FL 34234

Title: VD () Delete
Name: BAKER, LILLIAN
Address: 412 60TH AVE. WEST
City-St-Zip: BRADENTON, FL 34207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JENKINS, IRA E P
Address: 2955 GOODRICH AVE
City-St-Zip: SARASOTA, FL 34234

Title: V/S (X) Change () Addition
Name: JENKINS, TRACEY L V/S
Address: 2955 GOODRICH AVE
City-St-Zip: SARASOTA, FL 34234

Title: T (X) Change () Addition
Name: BAKER, LILLIAN
Address: 412 60TH AVE W
City-St-Zip: BRADENTON, FL 34207

Title: M (X) Change () Addition
Name: GIBSON, DORIS
Address: 1407 15TH AVE E
City-St-Zip: BRADENTON, FL 34208

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: IRA E.JENKINS

P

04/02/2008

Electronic Signature of Signing Officer or Director

Date