

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720942

FILED  
Jan 26, 2010  
Secretary of State

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

**Current Principal Place of Business:**

1020 70TH ST. CT. E.  
RUBONIA, FL 34221 US

**New Principal Place of Business:**

1112 SW MARTIN LUTHER KING, JR. DR.  
MADISON, FL 32340 US

**Current Mailing Address:**

2955 GOODRICH AVE  
SARASOTA, FL 34234 US

**New Mailing Address:**

P O BOX 1072  
MADISON, FL 32341

**FEI Number:** 65-0058900

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JENKINS, IRA E CEO  
2955 GOODRICH AVE  
SARASOTA, FL 34234 US

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

MEDLER, LEE PASTOR  
1112 SW MARTIN LUTHER KING JR. DR.  
MADISON, FL 32340 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: PASTOR LEE MEDLER

01/26/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MEDLER, LEE  
Address: P O BOX 1161  
City-St-Zip: MADISON, FL 32341

Title: VP  
Name: JAMES, ROSA MAE  
Address: 186 S. W. LEE AVE.  
City-St-Zip: MADISON, FL 32340

Title: S  
Name: SANDERS, LORENE  
Address: 2648 N. E. OAK HILL RD.  
City-St-Zip: PINETTA, FL 32350

Title: T  
Name: MONTS, GLORIA  
Address: 6854 COLIN KELLY HIGHWAY  
City-St-Zip: MADISON, FL 32340

Title: D  
Name: JOSEPH, KAY  
Address: 408 S. W. JEANETTE CIRCLE  
City-St-Zip: MADISON, FL 32340

Title: D  
Name: BARFIELD, PATRICIA  
Address: 276 W. MARION ST.  
City-St-Zip: MADISON, FL 32340

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: PASTOR LEE MEDLER

P

01/26/2010

Electronic Signature of Signing Officer or Director

Date