

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 02, 1999 8:00 am  
Secretary of State

03-02-1999 90083 032 \*\*\*\*70.00

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DOCUMENT # 731620

1. Corporation Name

THE WORLD DELIVERANCE CHURCH BY JESUS CHRIST, IN  
C.

Principal Place of Business

Mailing Address

PO BOX 69-3574  
MIAMI 33 33269  
US

PO BOX 69-3574  
MIAMI 33 33629  
US



2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

MARKS, MITCHELL S  
701 N.W. 210 ST., #511  
MIAMI FL 33169

3. Date Incorporated or Qualified

01/16/1975

4. FEI Number

51-0187768

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

PD  
MARKS, MITCHELL  
701 N.W. 210 STREET, UNIT 511  
MIAMI FL 33169

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

VD  
MARKS, VIVIEN  
701 N.W. 210 STREET, UNIT 511  
MIAMI FL 33169

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SD  
DOLNIER, PAUL  
14 PLEASANT ST. #2  
ROCHESTER NH 03867

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TD  
SAPER, JEFFREY  
419 EAST 73 STREET, UNIT 2F  
NEW YORK NY 10021

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

D  
PAUL, JOSUE  
128 N.W. 4 AVENUE  
HALLANDALE FL 33009

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change

☒ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

Director  
Bill Rice  
19730 S.W. 12 St.  
Pembroke Pines, FL 33029

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

Director  
J.J. Kelly  
19730 S.W. 12 St.  
Pembroke Pines, FL 33029

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

SD  
Paul Dolnier  
18 Woodman St.  
Rochester, NH 03867

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

MITCHELL S MARKS  
PRESIDENT

1/20/99

3056513223

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)