

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731620

FILED
Mar 02, 2004
Secretary of State**Entity Name:** WORLD DELIVERANCE MINISTRIES, A SOCIAL SERVICE AGENCY, INC.**Current Principal Place of Business:**3600 S STATE RD 7, #44
MIRAMAR, FL 33023 US**New Principal Place of Business:**3600 S STATE RD 7, #12
MIRAMAR, FL 33023 US**Current Mailing Address:**3600 S STATE RD 7, #44
MIRAMAR, FL 33023 US**New Mailing Address:**3600 S STATE RD 7, #12
MIRAMAR, FL 33023 US**FEI Number:** 51-0187768**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DOLNIER, PAUL
7091 MOSELY ST
HOLLYWOOD, FL 33024 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: VD () Delete
Name: MARKS, MITCHELL
Address: 701 N.W. 210 STREET, UNIT 511
City-St-Zip: MIAMI, FL 33169 USTitle: SD () Delete
Name: MARKS, VIVIEN
Address: 701 N.W. 210 STREET, UNIT 511
City-St-Zip: MIAMI, FL 33169Title: PTM () Delete
Name: DOLNIER, PAUL
Address: 7091 MOSELEY STREET
City-St-Zip: HOLLYWOOD, FL 33024Title: D () Delete
Name: RICE, BILL
Address: 19730 SW 12 ST
City-St-Zip: PEMBROKE PINES, FL 33029**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MITCHELL MARKS

VD

03/02/2004

Electronic Signature of Signing Officer or Director

Date