

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731620

FILED
Mar 28, 2005
Secretary of State

Entity Name: WORLD DELIVERANCE MINISTRIES, A SOCIAL SERVICE AGENCY, INC.

Current Principal Place of Business:

3600 S STATE RD 7, #12
MIRAMAR, FL 33023 US

New Principal Place of Business:

1873 NORTH 66TH AVENUE
SUITE 143
HOLLYWOOD, FL 33024 US

Current Mailing Address:

3600 S STATE RD 7, #12
MIRAMAR, FL 33023 US

New Mailing Address:

1873 NORTH 66TH AVENUE
SUITE # 143
HOLLYWOOD, FL 33024 US

FEI Number: 51-0187768

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

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 US

Title: SD () Delete
Name: MARKS, VIVIEN
Address: 701 N.W. 210 STREET, UNIT 511
City-St-Zip: MIAMI, FL 33169

Title: PTM () Delete
Name: DOLNIER, PAUL
Address: 7091 MOSELEY STREET
City-St-Zip: HOLLYWOOD, FL 33024

Title: D () Delete
Name: RICE, BILL
Address: 19730 SW 12 ST
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MARKS, MITCHELL
Address: 701 N.W. 210 STREET, UNIT 511
City-St-Zip: MIAMI, FL 33169 US

Title: D (X) Change () Addition
Name: THE TAX ASSISTANCE C, ENTER
Address: 7091 MOSLEY STREET
City-St-Zip: HOLLYWOOD, FL 33024 US

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: PAUL M. DOLNIER

D

03/28/2005

Electronic Signature of Signing Officer or Director

Date