

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731620

FILED  
Apr 30, 2006  
Secretary of State

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

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**Current Mailing Address:**

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

**New Mailing Address:**

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

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

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: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: THE TAX RESOURCE CEN, TER  
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 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: PAUL DOLNIER

PTM

04/30/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date