

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 731620

FILED
May 29, 2009
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:

16208 NE 12TH AVENUE
MIAMI, FL 33162 US

Current Mailing Address:

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

New Mailing Address:

16208 NE 12TH AVENUE
MIAMI, FL 33162 US

FEI Number: 51-0187768 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DOLNIER, PAUL
7091 MOSELY ST
HOLLYWOOD, FL 33024 US

Name and Address of New Registered Agent:

DOLNIER, PAUL
16208 NE 12TH AVENUE
MIAMI, FL 33162 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: PAUL DOLNIER

05/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JOHNSON, GARY
Address: 1873 NORTH 66TH AVENUE
City-St-Zip: MIAMI, FL 33024 US

Title: D () Delete
Name: CHARITY WATCH CENTER
Address: 1873 NORTH 66TH AVENUE
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: SMITH, MICHEAL
Address: 16208 NE 12TH AVENUE
City-St-Zip: NORTH MIAMI BEACH, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JOHNSON, GARY
Address: 16208 NE 12TH AVENUE
City-St-Zip: MIAMI, FL 33162 US

Title: D (X) Change () Addition
Name: CHARITY WATCH CENTER
Address: 16208 NE 12TH AVENUE
City-St-Zip: MIAMI, FL 33162 US

Title: PTM (X) Change () Addition
Name: DOLNIER, PAUL
Address: 16208 NE 12TH AVENUE
City-St-Zip: MIAMI, FL 33162

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

I hereby certify that the information supplied with this filing does not qualify 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

PRES

05/29/2009

Electronic Signature of Signing Officer or Director

Date