

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737208

FILED  
Jan 07, 2005  
Secretary of State

**Entity Name:** TEMPLE OF FAITH, DELIVERANCE AND SALVATION, INC.

**Current Principal Place of Business:**

1007 MANATEE AVE.,E.  
P.O.BOX 9646  
BRADENTON, FL 34206

**New Principal Place of Business:**

**Current Mailing Address:**

1007 MANATEE AVE.,E.  
P.O.BOX 9646  
BRADENTON, FL 34206

**New Mailing Address:**

**FEI Number:** 65-0075412      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

MOSELEY, THOMAS A  
1724 MANATEE AVE. W.  
BRADENTON, FL 34205      US

**Name and Address of New Registered Agent:**

MACKEY LAW GROUP .P.A.  
1402 THIRD AVE. WEST  
BRADENTON, FL 34205      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: ROBERT A. HOONHOUT

01/07/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: SIMON, FRANKLIN D  
Address: 1612 18TH AVENUE WEST  
City-St-Zip: PALMETTO, FL 34221 US

Title: VD      ( ) Delete  
Name: KELLY, THELMA  
Address: 1806 5TH AVE. WEST  
City-St-Zip: PALMETTO, FL 34221 US

Title: SD      ( ) Delete  
Name: FRANKLIN, JOESPH  
Address: 6905 MAGELLAN COURT  
City-St-Zip: SARASOTA, FL 34212 US

Title: TD      ( ) Delete  
Name: KELLY, LEON  
Address: 1806 5TH AVENUE WEST  
City-St-Zip: PALMETTO, FL 34221 US

Title: D      ( ) Delete  
Name: SIMON, FLORENCE L  
Address: 1612 18TH AVE WEST  
City-St-Zip: PALMETTO, FL 34221 US

Title: D      ( ) Delete  
Name: DEXTER, JAMES  
Address: 2322 9TH AVENUE EAST  
City-St-Zip: PALMETTO, FL 34221 US

**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:

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: BISHOP FRANKLIN D. SIMON

PD

01/07/2005

Electronic Signature of Signing Officer or Director

Date