2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2010
Secretary of State

DOCUMENT# 739779

Entity Name: FAITH HOPE & CHARITY DELIVERANCE CENTER, INC.

Current Principal Place of Business:

13223 NW 140TH ST
ALACHUA, FL 32616 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 327
ALACHUA, FL 32616 US

New Mailing Address:

FEI Number: 59-2699872 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MALPHURS, NEIL A.
4 NORTH MAIN STREET
ALACHUA, FL 32616 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: PD
Name: TATE, ELIZA BELLE
Address: 13323 NW 157TH AVE
City-St-Zip: ALACHUA, FL 32616

Title: VD
Name: MAYES, BELINDA
Address: 421 SOUTH WESTOVER BLVD
City-St-Zip: ALBANY, GA 31707

Title: SD
Name: ROLLINS, GLORIA
Address: 2310 NE 64TH TERRACE
City-St-Zip: GAINESVILLE, FL 32609

Title: TD
Name: STEPHENS, DEBORAH
Address: 20625 NW CR 235-A
City-St-Zip: ALACHUA, FL 32616

I hereby 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 all other like empowered.

SIGNATURE: DR. ELIZA BELLE TATE PD 04/07/2010

Electronic Signature of Signing Officer or Director Date