FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

STREET ADDRESS

CITY-ST-ZIP

740070

(8)

JESUS SUPERNATURAL DELIVERANCE CHURCH, INC.

											Ш		
Principal Place of Business Mailing Address								((1 9 181) 4 1			
700 NW 21ST AVENUE POMPANO BEACH FL 33069-2439 US			1524 NW 2ND STREET POMPANO BEACH FL 33069-2819 US										
								3. Date Incorporated or Qualified 09/07/1977 03/11/1996					
2. Principal Place of Business			2a. Mailing Address					4. FEI Number Applied F				lied For	
21			26					59-1776103 Not Applicable					
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75 Additional Fee Required			
City & State			City & State					6. Election Campaign Financing \$5.00 May Be					
23			28					Trust Fund Contribution	Щ			Fees	
Zip	Country	<u> </u>	Zip Gountry			<i>'</i>		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes					
24	25 9. Name and Address of Curren	29 L Regis	stered Agent	30]	0]			Florida Statutes Yes No 10. Name and Address of New Registered Agent					
	e, traine and receives of content	, .	70.00 1.8011		81	Nam	6						
DAVIS, HERBERT					60	Otron	A A alaka	so (D.C. Bou Number to Not Accorde					
1524 N.W. 2ND STREET			82 Street				A Addres	dress (P.O. Box Number is Not Acceptable)					
POMPANO BEACH FL 33069				83	1								
				:	84	City				85	Zip C	odo	
				:		'			<u> </u>		•		
office or re	egistered agont, or both, in the State.	of Flori	ida. Such chango was i	authoriz	ed be	v the co	ed corpo	ration submits this statement for the pon's board of directors. I hereby accep	urpose of	changi ointmer	ing its	registered egistered	
agent. I a	m familiar with, and accept the obliga	ations o	of, Section 617.0503, F	lorida \$t	atute	s.	nportatio		, the opp			-g.c.io.	
SIGNATURE _									5.175				
12.	Signature, typed or printed name of registered age OFFICERS ANI			TE Hogisje		ent signat	ure required	d when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE ERS AND	DIREC	TORS	3 IN 12	
TITLE	SD	J DIIIL	DELETE		TITLE		T		2.1.2.1.1.1.1	☐ Cha		Addition	
NAME	JACOBS, LOVEIST			1,2	NAME								
STREET ADDRESS	1548 N.W. 15TH AVE.					1,3 STREET ADDRESS							
CITY-ST-ZIP	FT. LAUDERDALE FL					ST-ZIP							
TITLE	VD		DELETE	2 1	2 ₁ 1 TITLE					Cha	nge	Addition	
NAME	Godner, ernest		2 2	2 2 NAME									
STREET ADDRESS	641 SW 14TH ST		2,3 STREE			s							
CITY-ST-ZIP	DEERFIELD BCH FL					ST-ZIP							
TITLE	PD		DELETÉ		TITLE					∐ Cha	nge	☐ Addition	
NAME	DAVIS, HERBERT				NAME								
STREET ADDRESS	1524 N.W. 2ND ST. POMPANO BEACH FL			1		T ADDRES	8						
CITY-ST-ZIP TITLE	TD DEACH FL		DELETE		TITLE	ST-ZIP				Cha		Addition	
NAME	SIMS, LUELLA		L. Decem		NAME								
STREET ADDRESS	301 N.W. 17TH CT.					t addres	ای						
CITY-SY-ZIP	POMPANO BEACH FL					ST-ZIP							
TITLE			DELETE		TITLE		1			☐ Cha	ange	Addition	
NAME				5.2	NAME								
STREET ADDRESS				i		t addres	s					;	
CITY-ST-ZIP				5.4	CITY-	ST-ZIP							
TITLE			☐ DELETE	6,1	TITLE					☐ Cha	inge	Addition	
NAME				6,2	NAME								

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

6.4 CITY-ST-ZIP

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954 979 1994

FILED

May 20 1997 8:00am

Secretary of State