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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 740070

1. Corporation Name

JESUS SUPERNATURAL DELIVERANCE CHURCH, INC.

Principal Place of Business

 700 NW 21ST AVENUE
 POMPANO BEACH FL 33069-2439
 US

Mailing Address

 1524 NW 2ND STREET
 POMPANO BEACH FL 33069-2439
 US


2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		09/07/1977	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-1776103	
City & State		City & State		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing ☐ \$5.00 May Be Added to Fees	
Zip		Zip		Trust Fund Contribution ☐	
24		29		30	

9. Name and Address of Current Registered Agent

DAVIS, HERBERT
 1524 N.W. 2ND STREET
 POMPANO BEACH FL 33069

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agents signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SD ☐ DELETE	1.1 TITLE	OVERSEER ☒ Change ☐ Addition
NAME	JACOBS, LOVEIST	1.2 NAME	JACOBS, LOVEIST
STREET ADDRESS	1548 N.W. 15TH AVE.	1.3 STREET ADDRESS	1548 N.W. 15TH AVENUE
CITY-ST-ZIP	FT. LAUDERDALE FL	1.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33302
TITLE	VD ☒ DELETE	2.1 TITLE	VICE PRESIDENT OF BOARD ☒ Change ☒ Addition
NAME	GODNER, ERNEST	2.2 NAME	GEORGE W. MASTEN SR.
STREET ADDRESS	641 SW 14TH ST	2.3 STREET ADDRESS	2430 N. PINE ISLAND RD
CITY-ST-ZIP	DEERFIELD BCH FL	2.4 CITY-ST-ZIP	SUNRISE, FLORIDA 33322
TITLE	PD ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	DAVIS, HERBERT	3.2 NAME	
STREET ADDRESS	1524 N.W. 2ND ST.	3.3 STREET ADDRESS	
CITY-ST-ZIP	POMPANO BEACH FL	3.4 CITY-ST-ZIP	
TITLE	TD ☒ DELETE	4.1 TITLE	FINANCIAL SECRETARY ☒ Change ☒ Addition
NAME	SIMS, LUELLA	4.2 NAME	BRENDA GRAHAM
STREET ADDRESS	301 N.W. 17TH CT.	4.3 STREET ADDRESS	4710 NW 12TH STREET
CITY-ST-ZIP	POMPANO BEACH FL	4.4 CITY-ST-ZIP	LAUDERHILL, FLORIDA 33317
TITLE	D ☐ DELETE	5.1 TITLE	DIRECTORS ☐ Change ☒ Addition
NAME	GARY E. MCLAMORE	5.2 NAME	TERRY CRAWFORD
STREET ADDRESS	4150 WOODSIDE DRIVE #3	5.3 STREET ADDRESS	2322 NW 52ND CT.
CITY-ST-ZIP	CORAL SPRING, FLA	5.4 CITY-ST-ZIP	TAMARAC, FLORIDA 33321
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☒ Addition
NAME		6.2 NAME	MYRTIC R. JACKSON
STREET ADDRESS		6.3 STREET ADDRESS	820 NW 170th TERR
CITY-ST-ZIP		6.4 CITY-ST-ZIP	MIAMI, FLORIDA 33309

14. I 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, with all other like empowered.

SIGNATURE: *[Signature]* **HERBERT DAVIS APRIL 8, 1999**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037-(11/98)