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2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 18, 2000 8:00 am
Secretary of State
04-17-2000 90051 037 ****61.25

DOCUMENT # 740070

1. Entity Name: JESUS SUPERNATURAL DELIVERANCE CHURCH INC.

403586

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
700 NW 21ST AVENUE POMPANO BEACH, FL 33069-2439 US	P.O. BOX 118 POMPANO BEACH, FL 33069 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number: 59-1776103 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
DAVIS, HERBERT 1524 NW 2ND STREET POMPANO BEACH, FL 33069	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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: [signature] DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	OVERSEER JACOBS, LOVEIST 1548 N.W. 15TH AVENUE FT.LAUDERDALE FL33302 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MYRTIC R. JACKSON 820 NW 170TH TERR MIAMI, FL 33309 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD DAVIS, HERBERT 1524 N.W. 2ND STREET POMPANO BEACH,FL 33069 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD GEORGE W. MASTEN SR. 2430 N. PINE ISLAND RD SUNRISE, FL 33322 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	FINANCIAL SECRETARY BRENDA GRAHAM 4710 NW 12TH STREET LAUDERHILL, FL 33317 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTORS TERRY CRAWFORD 2322 NW 52ND CT. TAMARAC,FL 33321 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GARY MCLAMORE 4150 WOODSIDE DRIVE #3 CORAL SPRING, FL 33323 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (9/99)

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: HERBERT DAVIS (PRESIDENT) APRIL 10,2000 (954)974-8773

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

[signature]