2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#740070

FILED Mar 07, 2007 Secretary of State

Entity Name: JESUS SUPERNATURAL DELIVERANCE CHURCH, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	ST AVENUE BEACH, FL	330692439 US			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
P.O BOX 6 POMPANO	66843 BEACH, FL	33066 US			
FEI Number:	59-1776103	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:	
360 NW 20		330692439 US			
The above in the State		submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR	RE:				
	Electror	ic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	O () MCLAMORE, G 591 N.E. 38TH POMPANO BEA	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () CRAWFORD, T 360 N.W. 20TH POMPANO BEA	AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () ORR, LILLIAN 901 N.W. 5TH A POMPANO BEA		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SMITH, W. MAT 412 E. EVANST		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () CRAWFORD, Y 820 N.W. 170T MIAMI, FL 331	H TERRACE	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: TERRY CRAWFORD P 03/07/2007