

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2003 8:00 am
Secretary of State

02-21-2003 90823 044 ****61.25

DOCUMENT # 740070

1. Entity Name

JESUS SUPERNATURAL DELIVERANCE CHURCH, INC.



Principal Place of Business

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

Mailing Address

**P.O BOX 666843
POMPANO BEACH FL 33066
US**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

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

**MASTEN, GEORGE W
2430 N PINE ISLAND ROAD
SUNRISE FL 33322-3268**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	O	☐ Delete
NAME	JACOBS, LOVEIST	
STREET ADDRESS	1548 N.W. 15TH AVE.	
CITY-ST-ZIP	FT LAUDERDALE FL 33101	
TITLE	VD	☐ Delete
NAME	MASTEN, GEORGE W	
STREET ADDRESS	2430 N. PINE ISLAND RD	
CITY-ST-ZIP	SUNRISE FL 33322	
TITLE	PD	☐ Delete
NAME	DAVIS, HERBERT	
STREET ADDRESS	1524 N.W. 2ND ST.	
CITY-ST-ZIP	POMPANO BEACH FL 33069	
TITLE	FS	☐ Delete
NAME	MASTEN, BRENDA W	
STREET ADDRESS	2430 N PINE ISLAND ROAD	
CITY-ST-ZIP	SUNRISE FL 33322	
TITLE	D	☐ Delete
NAME	CRAWFORD, TERRY	
STREET ADDRESS	2822 NW 52ND COURT	
CITY-ST-ZIP	TAMARAC FL 33309	
TITLE	S	☐ Delete
NAME	JACKSON, MYRTICE	
STREET ADDRESS	820 NW 170TH TERRACE	
CITY-ST-ZIP	MIAMI FL 33169	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: *George W. Masten Sr.* (REV. GEORGE W, MASTEN SR,) 2-13-03

CR2E037 (10/02)