

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745130

FILED
Apr 26, 2006
Secretary of State

Entity Name: SUPERNAUTAL DELIVERANCE CHURCH OF CHRIST, INC.

Current Principal Place of Business:

401 DEPOT AVENUE
PO BOX 8064
DELRAY BEACH, FL 33444

New Principal Place of Business:

Current Mailing Address:

401 DEPOT AVENUE
PO BOX 8064
DELRAY BEACH, FL 33482

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ANDREWS, TONIE DAVID REV
401 DEPOT AVENUE
P.O. BOX 8064
DELRAY BEACH, FL 33482 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ANDREWS, TONIE DAVID
Address: 401 DEPOT AVENUE
City-St-Zip: DELRAY BEACH, FL 33447

Title: VD () Delete
Name: ANDREWS, TONIE D.,
Address: 1881 N.E. 2 LANE
City-St-Zip: BOYNTON BEACH, FL

Title: STD () Delete
Name: THOMAS, ELMER,
Address: 1508 N.W. 4TH STREET
City-St-Zip: BOYNTON BEACH, FL 33435

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: TONIE D ANDREWS

PD

04/26/2006

Electronic Signature of Signing Officer or Director

Date