2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# 761513

Entity Name: FULL GOSPEL CHURCH OF DELIVERANCE OF FLORIDA CITY, INC.

Current Principal Place of Business:

950 NW 2ND ST.
FLORIDA CITY, FL 33034 US

New Principal Place of Business:

Current Mailing Address:

950 NW 2ND ST.
FLORIDA CITY, FL 33034 US

New Mailing Address:

FEI Number: 59-2207461 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ROLLE, HELEN B REV
950 NW 2ND ST.
FLORIDA CITY, FL 33034 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: P ( ) Delete
Name: ROLLE, HELEN B PASTOR
Address: 950 NW 2ND STREET
City-St-Zip: FLORIDA CITY, FL 33034

Title: VP ( ) Delete
Name: BRYANT, RAYMOND J ELDER
Address: 925 OSTREY LANE
City-St-Zip: ROCKLEDGE, FL 32955

Title: C ( ) Delete
Name: MICELAIT, PHOEBE
Address: 1944 CANAL RD
City-St-Zip: LAKE WALES, FL 33898

Title: S ( ) Delete
Name: LEE, OLA P
Address: 657 S.W. 4TH AVE
City-St-Zip: HOMESTEAD, FL 33030

Title: T ( ) Delete
Name: BRYANT, SAMUEL III
Address: 980 S.W. 7 PL
City-St-Zip: FLORIDA CITY, FL 33034

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:

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 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: PASTOR HELEN B ROLLE P 04/15/2009

Electronic Signature of Signing Officer or Director Date