

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 04, 2004  
Secretary of State**

DOCUMENT# 761556

**Entity Name:** THE TABERNACLE OF PRAYER AND DELIVERANCE INCORPORATION

**Current Principal Place of Business:**

415 SOUTH CENTRAL AVE.  
APOPKA, FL 32703 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 555336  
ORLANDO, FL 32855 US

**New Mailing Address:**

**FEI Number:** 59-2584418      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

HILL, GEORGIA ANN  
2221 PATTERSON AVE.  
ORLANDO, FL 32811 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: HILL, GEORGIA,  
Address: 2221 PATTERSON AVE  
City-St-Zip: ORLANDO, FL 32811

Title: VD ( ) Delete  
Name: HARRIS, JOHN,  
Address: 815 HARARE LANE  
City-St-Zip: NASHVILLE, NC 27856

Title: SD ( ) Delete  
Name: NELSON, AZIKALEN T  
Address: 2221 PATTERSON AVENUE  
City-St-Zip: ORLANDO, FL 32811

**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 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 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: GEORGIA ANN HILL

PD

02/04/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date