

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762514

FILED  
Apr 16, 2006  
Secretary of State

**Entity Name:** EVANGELISTIC DELIVERANCE MIRACLES REVIVAL CENTER, INC.

**Current Principal Place of Business:**

9892 SE 159TH AVE  
WHITE SPRINGS, FL 32096 US

**New Principal Place of Business:**

**Current Mailing Address:**

9892 SE 159TH AVE.  
WHITE SPIRNGS, FL 320960143 US

**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:**

SHEPPARD, ELLA M  
713 NE CATAWBA AVE  
LAKE CITY, FL 32055 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: DYE, JOHN H  
Address: 281 N.W FIDDLERS LN.  
City-St-Zip: LAKE CITY, FL 32055 US

Title: TD ( ) Delete  
Name: MARSHALL, HELEN  
Address: 14432 SE COUNTY ROAD 25A  
City-St-Zip: WHITE SPRINGS, FL 32096 US

Title: VD ( ) Delete  
Name: DYE, CAROLYN Y  
Address: 281 NW FIDDLERS LANE  
City-St-Zip: LAKE CITY, FL 32055 US

Title: S ( ) Delete  
Name: VREEN, FERTIMA N  
Address: 1131 NE 192ND AVE  
City-St-Zip: GAINESVILLE, FL 32609 US

**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: S (X) Change ( ) Addition  
Name: VREEN, FERTIMA N  
Address: 1717 S.W. WESTGATE LN.  
City-St-Zip: LAKE CITY, FL 32025 US

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: JOHN HENRY DYE

PD

04/16/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date