2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000003744

FILED Jun 11, 2007 Secretary of State

Entity Name: THE DISCIPLES OF CHRIST DELIVERANCE OUTREACH APOSTOLIC CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business:

289 HALSPUR ROAD 289 HALLSPUR ROAD

HAZLEHURST, GA 315390971 US HAZLEHURST, GA 315390971 US

Current Mailing Address: New Mailing Address:

PO BOX 58

HAZLEHURST, GA 31539 US

FEI Number: 58-2359381 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

BOYD, CHERYL C MINCEY, MARCUS PASTOR 7234 KEN KNIGHT DR E 708 JEFFERSON ST.

JACKSONVILLE, FL 32209 US NEW SMYRNA BEACH, FL 32168 US

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: MARCUS MINCEY 06/11/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: P () Delete Title: ADM (X) Change () Addition

 Name:
 STOUT, MONICA
 Name:
 STOUT, MONICA

 Address:
 208 BAY AVE
 Address:
 P.O. BOX 124

 City-St-Zip:
 MCREA, GA 31083
 City-St-Zip:
 SCOTLAND, GA 31083

Title: S () Delete Title: P (X) Change () Addition

Name: CONEY, LOUISE Name: MINCEY, MARCUS
Address: 1091 OAK FOREST APT. 14 Address: 708 JEFFERSON ST.

City-St-Zip: EASTMAN, GA 31023 City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: D () Delete Title: D (X) Change () Addition Name: ALLEN, ZARET Name: ALLEN, ZARET

Address: 10 LOUISE LANE Address: 137 JOHN LONG RD. LOT #7

City-St-Zip: BAXLEY, GA City-St-Zip: HAZLEHURST, GA 31539

Title: P () Delete Title: P (X) Change () Addition Name: EADY, CORTEZ Name: EADY, CORTEZ

Address: 2ND AVE Address: 137 JOHN LONG RD. LOT # 6

City-St-Zip: SCOTLAND, GA City-St-Zip: HAZLEHURST, GA 31539

Title: EL (X) Delete Title: () Change () Addition

 Name:
 HILL SR, ELDER J
 Name:

 Address:
 WILLIE FOSTER RD.
 Address:

 City-St-Zip:
 HAZLEHURST, GA
 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: MONICA STOUT ADM 06/11/2007