2001 UNIFORM BUSINESS REPORT (UBR)

CITY-ST-ZIP

Sep 17, 2001 8:00 am Secretary of State DOCUMENT # NDDODO 01365" 1. Entity Name New 09-17-2001 90009 001 ****61.25 Tabernacie Deliverance Baptist Church Principal Place of Business Mailing Address Taza Blair Drive Orlando, A. 32818 U0063700 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For City & State City & State 59.362.8Tac Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Davis, Henry Rev. Name Street Address (P.O. Box Number is Not Acceptable) 7222 Black Dr. Orlando Fl. 32818 City Zip Code 8. 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. (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State After September 12, 2001, min. will be \$236.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. (2/04) ☐ Delete TITLE ☐ Addition TITLE Walker, Julius NAME NAME 1661 Garmon Lane Orlando, Fl. 32811 STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Delete Change ☐ Addition TITLE TITLE Samuels, Derricks 2131 Honours Road Orlando, Ft. 32836 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITI F Delete TITLE ☐ Change Addition Daris Demetrius 1674a Callie Road NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP Change ☐ Addition ☐ Defete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

ME OF SIGNING OFFICER OR DIRECTOR

9-11-01

FILED