

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001506

FILED
May 01, 2009
Secretary of State

Entity Name: THE SANCTUARY OF THE LORD DELIVERANCE MINISTRY, INC.

Current Principal Place of Business:

3938 CALDWELL DR
TALLAHASSEE, FL 32310

New Principal Place of Business:

Current Mailing Address:

3938 CALDWELL DR
TALLAHASSEE, FL 32310

New Mailing Address:

FEI Number: 65-0991550 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

HANNOR, ANNIE
3938 CALDWELL DR
TALLAHASSEE, FL 32310 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HANNOR, ANNIE
Address: 1938 BAYWIND CT
City-St-Zip: TALLAHASSEE, FL 32303

Title: VP () Delete
Name: JOHNSON, LEITH
Address: 1477 CAPITAL CIRCLE NW
City-St-Zip: TALLAHASSEE, FL 32303

Title: ED () Delete
Name: HALL, ALBERTA
Address: 3151 NW 16TH ST.
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: D () Delete
Name: WILLIAMS, LEVON
Address: 7470 NW 35TH ST
City-St-Zip: FT. LAUDERDALE, FL

Title: T () Delete
Name: BROWN, TAMETRIA
Address: 1080 E COUNTRY CLUB CIRCLE
City-St-Zip: PLANTATION, FL 33317

Title: D () Delete
Name: HAMILTON, CALVIN
Address: 7470 NW 35TH ST
City-St-Zip: FT. LAUDERDALE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: PAYNE, BRUCE
Address: 7654 NW 17TH PLACE
City-St-Zip: MIAMI, FL 33147

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: BROWN, TAMETRIA
Address: 660 NW 65TH AVENUE
City-St-Zip: PLANTATION, FL 33317

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: ANNIE HANNOR

P

05/01/2009

Electronic Signature of Signing Officer or Director

Date