2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 24, 2005 8:00 am **Secretary of State** DOCUMENT # N0000001858 -01-24-2005 90049 021 ****70.00

DELIVERANCE TEMPLE FIRST BORN CHURCH, INC. Principal Place of Business Mailing Address P.O. BOX 354 PAYNE RD. P.O. BOX 354 PAYNE RD. 50005581 CHATTAHOOCHEE, FL 32324 CHATTAHOOCHEE, FL 32324 3. Mailing Address 2. Principal Place of Business 5715 Hardawa Suite, Apt. #, etc. Suite, Apt. #, etc 01162005 Chg-NP CR2E037 (10/03) haltahoochee 4. FEI Number 59-3295441 Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired Gadsden Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DEAS, TITUS B JR. 4512 WESLEY DRIVE TALLAHASSEE, FL 32303 City Quinc 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Filing Fee Is \$61.25 \$5.00 May Be Make check payable to Trust Fund Contribution. Due by May 1, 2005 Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Delete Deas, Titus B. Jr 25 Quail Roost Drive TITLE TITLE ☐ Change DEAS, TITUS B JR. NAME NAME 4512 WESLEY DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TALLAHASSEE, FL 32303 CITY-ST-ZIP Change TITLE ☐ Delete TITLE Pamella Dubree NAME DUPREE, PAMELLA NAME 2855 Apolachee Phwy C142 512 REED STREET. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHATTAHOOCHEE, FL 32324 Tallahässee, FL 32308 CITY-ST-70P SD TITLE ☐ Delete TITLE Change ☐ Addition Amanda Heruse HOUSE, AMANDA NAME NAME 2416 Jackson Bluff Rd 108 3106 CARRIAGE MANOR CIRCLE STREET ADDRESS STREET ADDRESS TALLAHASSEE, FL-32304 - - -CITY-ST-ZIP Tallahassee FL 32304 CITY-ST-7IP TITLE Delete TELLE ☐ Change ☐ Addition NAME WILLIAMS, PENNY R NAME STREET ADDRESS 325 COCHRAN ROAD STREET ADDRESS CITY-ST-ZIP CHATTAHOOCHEE, FL 32324 CITY-ST-ZIP TITI F ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7P TITLE ☐ Delete TITL F Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

1447 SIGNATURE: