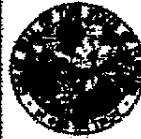


ANNUAL REPORT

DOCUMENT # N00000003960

1. Entity Name
BELLE GLADE YOUTH CRUSADE DELIVERANCE
CHURCH INC.



FILED
Jan 23, 2004 08:00 AM
Secretary of State

Principal Place of Business
556 W AVE "A"
BELLE GLADE, FL 33430

Mailing Address
POST OFFICE BOX 810
SOUTH BAY, FL 33493



01172004 No Chg-NP

CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1015430

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HUMPHREY, LEE
280 N W 7TH AVENUE
SOUTH BAY, FL 33493

**DO NOT WRITE
IN THIS SPACE**

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 agree, the obligations of registered agent.

SIGNATURE

Lee A. Humphrey

Signature, type or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/19/04

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	NORWOOD, MAGGIE
STREET ADDRESS	2050 N W 208TH STREET
CITY-ST-ZIP	OPA LOCKA, FL 33054
TITLE	VD
NAME	HUMPHREY, LEE
STREET ADDRESS	POST OFFICE BOX 810 N/A
CITY-ST-ZIP	SOUTH BAY, FL 33493
TITLE	SD
NAME	MOORER, SHIRLEY
STREET ADDRESS	POST OFFICE BOX 503 N/A
CITY-ST-ZIP	BELLE GLADE, FL 33430
TITLE	TD
NAME	MOORE, HELEN
STREET ADDRESS	554 S E THIRD STREET
CITY-ST-ZIP	BELLE GLADE, FL 33430
TITLE	D
NAME	JORDAN, VERA
STREET ADDRESS	20510 N W 25TH AVENUE
CITY-ST-ZIP	OPA LOCKA, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000011968
01/23/04-80059-014 70.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 as changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Lee A. Humphrey

1/19/04

Date

Florida Phone #