2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2005
Secretary of State

DOCUMENT# N00000003960

Entity Name: BELLE GLADE YOUTH CRUSADE DELIVERANCE CHURCH INC.

Current Principal Place of Business:

556 W AVE "A"
BELLE GLADE, FL 33430

New Principal Place of Business:

556 W AVE
BELLE GLADE, FL 33430

Current Mailing Address:

POST OFFICE BOX 810
SOUTH BAY, FL 33493

New Mailing Address:

FEI Number: 65-1015430 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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: PD ( ) Delete
Name: NORWOOD, MAGGIE
Address: 2050 N W 208TH STREET
City-St-Zip: OPA LOCKA, FL 33054

Title: VD ( ) Delete
Name: HUMPHREY, LEE
Address: POST OFFICE BOX 810 N/A
City-St-Zip: SOUTH BAY, FL 33493

Title: SD ( ) Delete
Name: MOORER, SHIRLEY
Address: POST OFFICE BOX 503 N/A
City-St-Zip: BELLE GLADE, FL 33430

Title: TD ( ) Delete
Name: MOORE, HELEN
Address: 554 S E THIRD STREET
City-St-Zip: BELLE GLADE, FL 33430

Title: D ( ) Delete
Name: JORDAN, VERA
Address: 20510 N W 25TH AVENUE
City-St-Zip: OPA LOCKA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LEE ALFRED HUMPHREY VD 03/25/2005

Electronic Signature of Signing Officer or Director — Date