2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008
Secretary of State

DOCUMENT# N00000006728

Entity Name: INTERNATIONAL DELIVERANCE CENTER, INC.

Current Principal Place of Business:

16021 SW 288TH ST
HOMESTEAD, FL 33030 US

New Principal Place of Business:

Current Mailing Address:

1918 DALTON WAY
HAMPTON, GA 30228 US

New Mailing Address:

FEI Number: 65-1038516 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
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:

JOHNSON, PRESCIOUS
67-A NE 9TH COURT
HOMESTEAD, FL 33030 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: D ( ) Delete
Name: WILLIAMS, LAKENYIA
Address: 15340 SW 284TH ST #174
City-St-Zip: HOMESTEAD, FL 33033

Title: DP ( ) Delete
Name: HILLS, GEORGE
Address: 28302 SW 157 AVE
City-St-Zip: HOMESTEAD, FL 33030

Title: DS ( ) Delete
Name: JOHNSON, PRESCIOUS
Address: 67-A NE 9TH COURT
City-St-Zip: HOMESTEAD, FL 33030

Title: D ( ) Delete
Name: CUNNINGHAM, JANICE
Address: 11352 SW 191 LANE
City-St-Zip: HOMESTEAD, FL 33030

Title: P ( ) Delete
Name: HILLS-JOHNSON, JOANNE
Address: 16021 SW 288 ST
City-St-Zip: HOMESTAED, FL 33030

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: WILLAMS, LAKENYIA
Address: 15340 SW 284TH ST #174
City-St-Zip: HOMESTEAD, FL 33033

Title: DP (X) Change ( ) Addition
Name: JOHNSON, JARVIS
Address: 1918 DALTON WAY
City-St-Zip: HAMPTON, GA 30228

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 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: LAKENYIA WILLAMS D 05/01/2008
Electronic Signature of Signing Officer or Director — Date