

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007054

FILED  
Apr 04, 2006  
Secretary of State

**Entity Name:** THE ARK OF DELIVERANCE MINISTRIES, INC.

**Current Principal Place of Business:**

2455 HWY 17 SOUTH  
34  
BARTOW, FL 33830

**New Principal Place of Business:**

6741 HARTSWORTH DRIVE  
LAKELAND, FL 33813 US

**Current Mailing Address:**

P.O. BOX 7604  
LAKELAND, FL 338077604

**New Mailing Address:**

**FEI Number:** 58-2582694

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PINELLO, DAVID J  
2455 HWY 17 SOUTH  
34  
BARTOW, FL 33830 US

**Name and Address of New Registered Agent:**

PINELLO, DAVID J  
6741 HARTSWORTH DRIVE  
LAKELAND, FL 33813 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:

04/04/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: PINELLO, DAVID J  
Address: 2455 HWY 17 SOUTH  
City-St-Zip: BARTOW, FL 33830

Title: D ( ) Delete  
Name: SAGE, RONALD  
Address: 6417 CHIPPENDALE RD  
City-St-Zip: LAKELAND, FL 33809

Title: D ( ) Delete  
Name: PIAZZA, JAMES  
Address: 437 CHAMROCK BLVD  
City-St-Zip: VENICE, FL 34293

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: PINELLO, DAVID J  
Address: 6741 HARTSWORTH DRIVE  
City-St-Zip: LAKELAND, FL 33813

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 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: DAVID J PINELLO

D

04/04/2006

Electronic Signature of Signing Officer or Director

Date