2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2005 8:00 am
Secretary of State
01-20-2005 90024 047 ****70.00

DOCUMENT # N01000002664

1. Entity Name
CHRIST DELIVERANCE OUTREACH TABERNACLE INC.

40003454

Principal Place of Business	Mailing Address
281 SW 27TH AVE FORT LAUDERDALE, FL 33312 US	627 SW 79 TERRACE NORTH LAUDERDALE, FL 33068

01102005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 65-1091881 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
JOHNSON, MARK A 627 SW 79 TERRACE NORTH LAUDERDALE, FL 33068	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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

Filing Fee is $61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JOHNSON, MARK A 627 SW 79 TERRACE NORTH LAUDERDALE, FL 33068	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Eugene Young 3885 NW 4th ST Fort Lauderdale FL 33311 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JOHNSON, MARGARET 627 SW 79 TERRACE NORTH LAUDERDALE, FL 33068	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ~~MCDUFFY JERLAINE~~ Correct to 3810 NW 8 ST FT LAUDERDALE, FL 33311	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	JOHNSON, JERALINE 3810 N.W. 8 ST Fort Lauderdale FL 33311 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MOBLEY, FRANCES 5801 NW 57TH CT., #K101 FORT LAUDERDALE, FL 33319	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Ingrid Frederick 3930 SW 59 Terrace Hollywood, FL 33023 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JOHNSON, DWIGHT M 2310 NW 32 TERR. LAUDERDALE LAKES, FL 33317	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCPHERSON, LLOYD G 8200 SW 22 ST NORTH LAUDDALE, FL 33068	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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.

SIGNATURE: _____ 12 JAN 05 954-689-8870
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #