

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002664

FILED  
Jan 25, 2007  
Secretary of State

**Entity Name:** CHRIST DELIVERANCE OUTREACH TABERNACLE INC.

**Current Principal Place of Business:**

6043 KIMBERLY BLVD  
STE P  
POMPAHO BEACH, FL 33068 US

**New Principal Place of Business:**

**Current Mailing Address:**

627 SW 79 TERRACE  
NORTH LAUDERDALE, FL 33068

**New Mailing Address:**

**FEI Number:** 65-1091881

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOHNSON, MARK A  
627 SW 79 TERRACE  
NORTH LAUDERDALE, FL 33068 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: CHARLOT, DELA  
Address: 3672 NW ILL TERR  
City-St-Zip: FORT LAUDERDALE, FL 33351

Title: D ( ) Delete  
Name: JOHNSON, MARGARET  
Address: 627 SW 79 TERRACE  
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: D ( ) Delete  
Name: JOHNSON, JERALINE  
Address: 3810 NW 8 ST  
City-St-Zip: FT LAUDERDALE, FL 33311

Title: D ( ) Delete  
Name: FREDERICK, INGRID  
Address: 3930 SW 59 TERRACE  
City-St-Zip: HOLLYWOOD, FL 33023

Title: D ( ) Delete  
Name: JOHNSON, DWIGHT M  
Address: 2310 NW 32 TERR  
City-St-Zip: LAUDERDALE LAKES, FL 33317

Title: D ( ) Delete  
Name: MCPHERSON, LLOYD G  
Address: 8200 SW 22 ST  
City-St-Zip: NORTH LAUDDALE, FL 33068

**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:

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: MARK A JOHNSON

PRES

01/25/2007

Electronic Signature of Signing Officer or Director

Date