

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N01000003385

1. Entity Name  
FAITH DELIVERANCE OUTREACH TEMPLE,  
INCORPORATED



Principal Place of Business  
410 S. MARTIN LUTHER KING BLVD.  
MACLENNY, FL 32063

Mailing Address  
7200 WAGON TRAIL ROAD  
TALLAHASSEE, FL 32310

FILED

07 APR 27 AM 9:31

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA



01042007 No Chg-NP CR2E037 (4/06)

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4. FEI Number 59-3739744	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SMALL, CHARLIE C  
410 S. MARTIN LUTHER KING BLVD.  
MACLENNY, FL 32063

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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, 2007

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SMALL, CHARLIE C
STREET ADDRESS	410 S. MARTIN LUTHER KING BLVD.
CITY-ST-ZIP	MACLENNY, FL 32063
TITLE	P
NAME	SMALL, ELOISE
STREET ADDRESS	410 S. MARTIN LUTHER KING BLVD.
CITY-ST-ZIP	MACLENNY, FL 32063
TITLE	V
NAME	SMALL, CHARLES A
STREET ADDRESS	7200 WAGON TRAIL RD.
CITY-ST-ZIP	TALLAHASSEE, FL 32310
TITLE	S
NAME	THOMAS, MELISSA R
STREET ADDRESS	1117 NE 16TH AVE.
CITY-ST-ZIP	GAINESVILLE, FL 32609
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 517, 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: Charlie C. Small  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-31-07 (52) 576-8488  
Date Daytime Phone #