2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# N01000004898

Entity Name: TABERNACLE OF REFUGE DELIVERANCE CENTER, INC.

Current Principal Place of Business:

2201 NW 22ND ST
FT LAUDERDALE, FL 33311

New Principal Place of Business:

Current Mailing Address:

16031 NE 19 PL
APT 4
N MIAMI BEACH, FL 33162

New Mailing Address:

FEI Number: 65-1121735 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

RUSSELL, STEFAN
7481 SW 10 COURT
#102C
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:	PD	( ) Delete
Name:	RUSSELL, STEFAN P	
Address:	2201 NW 22ND ST	
City-St-Zip:	FT LAUDERDALE, FL 33311	
Title:	TD	( ) Delete
Name:	CARTWRIGHT, MARGARET	
Address:	16031 NE 19 PL APT 4	
City-St-Zip:	NORTH MIAMI BEACH, FL 33162	
Title:	SD	( ) Delete
Name:	ARNETT, DORNELL	
Address:	7481 SW 10 COURT #102-C	
City-St-Zip:	NORTH LAUDERDALE, 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:	

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: STEFAN P. RUSSELL PD 05/01/2006

Electronic Signature of Signing Officer or Director — Date