

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000005747

**FILED**  
**Feb 17, 2011**  
**Secretary of State**

**Entity Name:** POTTER'S HOUSE DELIVERANCE TABERNACLE, INC.

**Current Principal Place of Business:**

6916 HARNEY ROAD  
TAMPA, FL 33617

**New Principal Place of Business:**

**Current Mailing Address:**

6916 HARNEY ROAD  
TAMPA, FL 33617

**New Mailing Address:**

**FEI Number:** 59-3739412

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

HAUSER, PATRICIA  
11864 BRANCH MOORING DRIVE  
TAMPA, FL 33635 US

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

HAUSER, PATRICIA  
6916 HARNEY ROAD  
TAMPA, FL 33617 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:

02/17/2011

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: HAUSER, PATRICIA  
Address: P.O BOX 89892  
City-St-Zip: TAMPA, FL 33689

Title: VD  
Name: THOMAS-SWOOP, VICKIE  
Address: 9288 CARNES CROSSING CIRCLE  
City-St-Zip: JONESBORO, GA 30236

Title: SD  
Name: JACKSON, DENISE  
Address: 1414 E SENECA ST  
City-St-Zip: TAMPA, FL 33612

Title: TD  
Name: SIMS, SARAH  
Address: 14516 SEAFORD CIRCLE #202  
City-St-Zip: TAMPA, FL 33613

I hereby 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 all other like empowered.

SIGNATURE: PATRICIA HAUSER

PD

02/17/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date