## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000006913

Apr 30, 2012 Secretary of State

Entity Name: TRUE GOSPEL DELIVERANCE MINISTRY, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

1301 NW 29 AVE 967 SW 56 AVE FORT LAUDERDALE, FL 33311 MARGATE, FL 33068

**Current Mailing Address: New Mailing Address:** 

967 SW 56 AVE PASTOR\_MONROE09@YAHOO.COM MARGATE, FL 33068

FEI Number: 65-1154629 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

FLEMING, SALLY 3019 NW 4TH CT. POMPANO BCH, FL 33069

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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

MONROE, SHARON Name: Address: 967 SW 56 AVE

City-St-Zip: POMPANO BEACH, FL 33068

Title:

Name: FLEMING, SALLY Address: 3019 NW 4TH CT City-St-Zip: POMPANO BEACH, FL 33069

Title: DT

STONE, ROBBIE Name: Address: 4810 NW 18ST City-St-Zip: LAUDERHILL, FL 33308

Title:

Name: DURHAM, LATRELL

10015 WINDING LAKE RD 103 Address: City-St-Zip: FORT LAUDERDALE, FL 33351

Title:

JOHNSON, NIGIEA Name: 6300 S FALL CIR DR Address:

FORT LAUDERDALE, FL 33319 City-St-Zip:

Title:

TIMMOY, MAXWELL Name: Address: 1548 NW 52 AVE #1

FORT LAUDERDALE, FL 33313 City-St-Zip:

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: SHARON MONROE Ρ 04/30/2012