## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## Mar 14, 2005 8:00 am Secretary of State DOCUMENT # N01000007747 1. Entity Name 03-14-2005 90094 032 \*\*\*\*70.00 FULL GOSPEL DELIVERANCE TEMPLE CHURCH OF GOD AND CHRIST, INC. Principal Place of Business Mailing Address 1665 STORY PLAZY P.O. BOX 10463 MARTIN LUTHER KING BLVD. RIVIERA BEACH FL 33404 RIVIERA BEACH FL 33419-0463 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (10/04) 1st MOORE Applied For City & State City & State 4. FEI Number 65-1152341 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent **DUBOIS. HARRY** Street Address (P.O. Box Number is Not Acceptable) 3450 SW RIVIERA STREET PORT SAINT LUCIE FL 34953 Zip Code 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 Make Check Payable to 9. Election Campaign Financing \$5.00 May Be Due By May 1, 2005 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11 TITLE ☐ Delete TITLE ☐ Change Addition DUBOIS, HARRY NAME NAME 3375 AVENUE J, APARTMENT #6 STREET ADDRESS STREET ADDRESS RIVIERA FL 33404 CITY-ST-ZIP CITY-ST-ZIP TD TITLE ☐ Delete TITLE Change ☐ Addition JONES, JESSIE NAME NAME 918 S. FEDERAL HIGHWAY, APARTMENT 15 STREET ADDRESS STREET ADDRESS LAKE WORTH FL 33460 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE - Delete TITLE" Change WILLIAMS, BARBRA NAME NAME 5938 BARBATOS WAY, WEST STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 33407 CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition TITLE ☐ Delete TITLE DUBOIS, LAMONT NAME NAME 3375 AVE TAP & S. RIVER STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 33404 CITY-ST-ZIP CITY-ST-7IP ☐ Addition ☐ Change TITLE ☐ Defete TITLE DUBOIS, LYDIA NAME NAME 3375 AVE TAP & SRIVER STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 33404 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete MURDAUGH, JAROME NAME NAME 557 S.W. HOLDEN ST STREET ADDRESS STREET ADDRESS PORT SAINT LUCIE FL 34953 CITY-ST-ZIP CITY-ST-7IP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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.

R OR DIRECTOR

**FILED**