

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 23, 2007 08:00 A**  
**Secretary of State**

DOCUMENT # N02000000101

1. Entity Name  
FAITH IN GOD CHRISTIAN DELIVERANCE CHURCH INC.



Principal Place of Business

3030 N. MICHIGAN AVE.  
KISSIMMEE, FL 34744

Mailing Address

PO BOX 770853  
ORLANDO, FL 32877



05202007 No Chg-NP

CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
NOT APPLICABLE

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

HAMPTON, BONNIE  
13224 HEATHER MOSS DRIVE #1210  
ORLANDO, FL 32837

**DO NOT WRITE  
IN THIS SPACE**

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 September 14, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JONES, JACK 12020 VILLA NOVA DRIVE 111 ORLANDO, FL 32837
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PASCASCIO, DEVONNE 13373 TWINWOOD LANE #2313 ORLANDO, FL 32837
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PASCASCIO, ERNEST 13373 TWINWOOD LANE #2313 ORLANDO, FL 32837
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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 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.

SIGNATURE: PASTOR JACK JONES, Pastor Jack Jones May 20, 2007

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #