

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001555

FILED  
Mar 20, 2009  
Secretary of State

**Entity Name:** FAITH DELIVERANCE CHURCH OF GOD MINISTRIES INCORPORATED

**Current Principal Place of Business:**

1841 W OAKLAND PARK BLVD  
OAKLAND PARK, FL 33309

**New Principal Place of Business:**

**Current Mailing Address:**

1841 W OAKLAND PARK BLVD  
OAKLAND PARK, FL 33309

**New Mailing Address:**

**FEI Number:** 65-0939125

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FORBES, SYLVIA E  
3088 CARYSFORT LANE  
MARGATE, FL 33063 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: S ( ) Delete  
Name: GRETEL, JAMES  
Address: 3141 NW 47 TERR BLD S APT 330  
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: TD ( ) Delete  
Name: SMELLIE, HILDA  
Address: 6790 NW 31 WAY  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: ASD ( ) Delete  
Name: FORBES, NADIA  
Address: 2400 NW 46 STREET  
City-St-Zip: LAUDERHILL, FL 33313

**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 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: SYLVIA FORBES

REV

03/20/2009

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

\_\_\_\_\_  
Date