2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001668

FILED Mar 30, 2005 Secretary of State

Entity Name: LOVE, FAITH, AND PEACE DELIVERANCE TEMPLE, INC.

Current Principal Place of Business:			New Prince	New Principal Place of Business:	
5406 AVEI JACKSON	NUE B VILLE, FL 3220	08			
Current Mailing Address:			New Maili	New Mailing Address:	
	ERT C. WEAVE VILLE, FL 3220				
El Number	: 42-1577054	FEI Number Applied For ()	FEI Number Not App	licable () Certificate of Status Desired ()	
lame and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
	N, SHENAVIAN	F			
315 QUAIL MACCLEN	INY, FL 32063	US			
	∈named entity s ∋ of Florida.	uprilits this statement for the pt	irpose of changing i	ts registered office or registered agent, or both,	
IGNATU					
SIGNATU		c Signature of Registered Ager	nt	Date	
SIGNATUI				Date IS/CHANGES TO OFFICERS AND DIRECTOR	
DFFICERS itle: lame: ddress:	Electroni S AND DIRECT	ORS: Delete JR C. WEAVER DR			
	Electroni S AND DIRECT PD () JAMES, FRANK 3959 ROBERT C JACKSONVILLE	Delete JR C. WEAVER DR , FL 32208 Delete COAD APT. 35	ADDITION Title: Name: Address:	IS/CHANGES TO OFFICERS AND DIRECTOR	
DFFICER: itle: lame: ddress: itty-St-Zip: ittle: lame: ddress:	Electroni S AND DIRECT PD () JAMES, FRANK 3959 ROBERT C JACKSONVILLE SD () EARLY, REGINA 2929 JUSTINA R JACKSONVILLE TD () JAMES, JANICE	Delete JR C. WEAVER DR FL 32208 Delete COAD APT. 35 FL 32277 Delete C. WEAVER DRIVE	ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address:	SD (X) Change () Addition (X) Change () Addition SD (X) Change () Addition TORRENCE, NAARAH PO BOX 12874	
DFFICER: ame: ddress: itty-St-Zip: ittle: ame: ddress: itty-St-Zip: ittle: ame: ddress: itty-St-Zip:	Electroni S AND DIRECT PD () JAMES, FRANK 3959 ROBERT (JACKSONVILLE SD () EARLY, REGINA 2929 JUSTINA R JACKSONVILLE TD () JAMES, JANICE 3959 ROBERT (JACKSONVILLE	Delete JR C. WEAVER DR , FL 32208 Delete COAD APT. 35 , FL 32277 Delete C. WEAVER DRIVE , FL 32208 Delete MA TRUSTEE S ROAD #74	ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address: City-St-Zip:	SD (X) Change () Addition () Change () Addition SD (X) Change () Addition TORRENCE, NAARAH PO BOX 12874 JACKSONVILLE, FL 32209	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: FRANK JAMES JR PD 03/30/2005