✓ 2006 NOT-FOR-PROFIT CORPORAȚION ANNUAL REPORT



FILED Apr 07, 2006 8:00 am Secretary of State

DOCUMENT # N03000003485 1. Eritin Name THE NEW STAY IN TOUCH WITH GOD DELEVERANCE MINISTRIES INC.						03-24-20	006 9002	1 005 **	**61.25	
Principal Place 5541 ARLING #3 JACKSONVELL		Mailing Address 455 Winter Street Jacksonville, FL 32								
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. F, etc.			03012006	Chg-NP	CR2E0	37 (11/05)		
City & State		City & State			4. FEI Number 45-0504				optied For at Applicable	
Zip	Country	Zip	Cou	intry	5. Certificate of	of Status Desired		\$8.75 Add Fee Require		
•	6. Name and Address of Current	t Registered Agent			7. Name and	Address of New	Registered	Agent		
				Name						
JONES, MERCY DR. 455 WINTER STREET JACKSONVILLE, FL 32254				Street Ad	tdress (P.O. Box Numbe	fress (P.O. Box Number is Not Acceptable)				
				City			FL	Zip Code	8	
									•	
SIGNATURE .	Signature, typed or presed name of registered age				re required when remotating)		DATE Make checi	k payable to	· 	
SIGNATURE /	Filing Fee is \$61.25 Due by May 1, 2006	9. Election Ca Trust Fund	mpeign F Contribut	inancing	\$5.00 May Bo Added to Fees	Fik	Make chec orida Depai	tment of Si	tate	
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12. Thereby certify that the information supplied with this filing does not quality for the exemptions contained in Chapter 118, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and occurse and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the occupation 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.

Mercy Banes DR, MERCY Jones
THE AND TYPES OF PROTECT MANE OF SECTION OF PROTECTION SIGNATURE: De