

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005317

FILED  
Apr 19, 2011  
Secretary of State

**Entity Name:** THE QUINCY AND COMMUNITY DELIVERANCE CHURCH OF GOD IN CHRIST INC.

**Current Principal Place of Business:**

523 S PAT THOMAS PYWY  
QUINCY, FL 32351

**New Principal Place of Business:**

**Current Mailing Address:**

523 S PAT THOMAS PYWY  
QUINCY, FL 32351

**New Mailing Address:**

**FEI Number:** 01-0787549

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

GREEN, WILLIE  
296 BRADWELL RD  
QUINCY, FL 32351 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:** DP  
**Name:** GREEN, WILLIE  
**Address:** 296 BRADWELL RD  
**City-St-Zip:** QUINCY, FL 32351

**Title:** DV  
**Name:** GREEN, JOSEPH  
**Address:** 2195 DUPONT RD  
**City-St-Zip:** HAVANA, FL 32333

**Title:** DS  
**Name:** WILLIAMS, PATRICIA  
**Address:** 390 M.L. KING BLVD  
**City-St-Zip:** GRETNA, FL 32332

**Title:** DT  
**Name:** DANTLEY, ELNORA  
**Address:** 609 VIRGINIA ST  
**City-St-Zip:** QUINCY, FL 32351

**Title:** D  
**Name:** BRYANT, ANNIE P  
**Address:** 522 S LINCOLN ST  
**City-St-Zip:** QUINCY, FL 32351

I hereby 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 all other like empowered.

**SIGNATURE:** WILLIE C. GREEN

DP

04/19/2011

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

\_\_\_\_\_  
Date