

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006203

FILED  
Apr 30, 2004  
Secretary of State

**Entity Name:** DELIVERANCE THROUGH THE WORD CAMPAIGNS, INC.

**Current Principal Place of Business:**

2124 NW 42 STREET  
MIAMI, FL 33142

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2043  
HALLANDALE BEACH, FL 33008

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCCRANE, GENEVA  
632 NW 1ST ST #519  
HALLANDALE BEACH, FL 33009 US

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

MCCRANE, GENEVA  
1790 NW 52ND STREET  
MIAMI, FL 33142 US

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:

04/30/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MCCRAE, GENEVA  
Address: 632 NW 1ST ST #519  
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: S ( ) Delete  
Name: PETTIFORD, TONYA C  
Address: 5225 MAYO ST  
City-St-Zip: HOLLYWOOD, FL 33021

Title: T ( ) Delete  
Name: CLAYTON, ALEXANDRIA  
Address: 3401 NW 170 ST  
City-St-Zip: MIAMI, FL 33054

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: MCCRAE, GENEVA  
Address: 1790 NW 52ND STREET  
City-St-Zip: MIAMI, FL 33142

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 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: GENEVA MCCRAE

P

04/30/2004

Electronic Signature of Signing Officer or Director

Date