## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000006545

FILED Jan 25, 2007 Secretary of State

Entity Name: MIRACLE DELIVERANCE PROPHETIC TEMPLE OF GOD, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

430 SOUTH FLORIDA AVE 1614 SOUTH COMBEE ROAD

LAKELAND, FL 33801 LAKELAND, FL 33801

**Current Mailing Address: New Mailing Address:** 

1614 SOUTH COMBEE ROAD 430 SOUTH FLORIDA AVE

LAKELAND, FL 33801 LAKELAND, FL 33801

FEI Number: 80-0071946 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

TEASLEY, ERIC TEASLEY, ERIC 428 S FLÓRIDA AVE 745 E CRÁWFORD ST

LAKELAND, FL 33801 US LAKELAND, FL 33805 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: 01/25/2007

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

TEASLEY, ERIC TEASLEY, ERIC Name: Name: 428 S FLORIDA AVE Address: 745 E. CRAWFORD ST Address:

City-St-Zip: LAKELAND, FL 33801 City-St-Zip: LAKELAND, FL 33805

Title: SD Title: (X) Change ( ) Addition ( ) Delete Name: BYRD, PHYLLIS Name: BYRD-PRICE, PHYLLIS

Address: 175 LAKE MORTON DRIVE APT 57 Address: 1731 NORTH DRIVE City-St-Zip: LAKELAND, FL 33801 City-St-Zip: LAKELAND, FL 33805

Title: () Delete Title: () Change () Addition

POLK, THERESA Name: Name: 1903 E 28 AVE Address: Address: City-St-Zip: TAMPA, FL 33605 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: PHYLLIS BYRD-PRICE SD 01/25/2007