2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007927

FILED May 16, 2006 Secretary of State

Entity Name: FAITH DELIVERANCE AND MIRACLE MINISTRIES, INC.

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

6032 NW 26TH ST 282 PUTNAM LOOP RD GAINESVILLE, FL 32653 PUTNAM HALL, FL 32185

Current Mailing Address: New Mailing Address:

6032 NW 26TH ST P.O. BOX 99

GAINESVILLE, FL 32653 PUTNAM HALL, FL 32185

FEI Number: 42-1603354 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

JENNINGS, STEPHAN E APOSTLE

6032 NW 26TH ST

GAINESVILLE, FL 32653 US

JENNINGS, STEPHAN E APOSTLE
282 PUTNAM LOOP RD
PUTNAM HALL, FL 32185 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: 05/16/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P () Delete
 Title:
 P (X) Change () Addition

 Name:
 JENNINGS, STEPHAN E
 Name:
 JENNINGS, STEPHAN E

 Address:
 6032 NW 26TH ST
 Address:
 282 PUTNAM LOOP RD

Address: 6032 NW 261H ST Address: 282 PUTNAM LOOP RD City-St-Zip: GAINESVILLE, FL 32653 City-St-Zip: PUTNAM HALL, FL 32185

Title: V () Delete Title: V (X) Change () Addition Name: JENNINGS, TERESA A Name: JENNINGS, TERESA A

Address: 6032 NW 26TH ST Address: 282 PUTNAM LOOP RD City-St-Zip: GAINESVILLE, FL 32653 City-St-Zip: PUTNAM HALL, FL 32185

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

 Name:
 MCCASKILL, TRENESA L
 Name:

 Address:
 PO BOX 4
 Address:

 City-St-Zip:
 PUTNAM HALL, FL 32185
 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: STEPHAN E. JENNINGS P 05/16/2006