2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010075

Apr 24, 2006 Secretary of State

Entity Name: DELIVERANCE TEMPLE MINISTRIES, INC

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

9850 OXFORD STATION DRIVE JACKSONVILLE, FL 32221

Current Mailing Address: New Mailing Address:

9850 OXFORD STATION DRIVE 11901 4TH STREET NORTH ST PETERSBURG, FL, FL 33716

FEI Number: 27-0072381 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ESSICK, GREGORY A SR
9850 OXFORD STATION DRIVE
JACKSONVILLE, FL 32221 US
ESSICK, GREGORY A SR
11901 4TH STREET NORTH
ST PETERSBURG, FL, FL 33716 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: 04/24/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 ESSICK, GREGORY A SR
 Name:
 ESSICK, GREGORY A SR

 Address:
 9850 OXFORD STATION DRIVE
 Address:
 11901 4TH STREET NORTH

 City-St-Zip:
 JACKSONVILLE, FL 32221
 City-St-Zip:
 ST PETERSBURG, FL 33716

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

 Name:
 ESSICK, VANITA C
 Name:

 Address:
 9850 OXFORD STATION DRIVE
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32221
 City-St-Zip:

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

 Name:
 ESSICK, GREGORY A JR
 Name:

 Address:
 9850 OXFORD STATION DRIVE
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32221
 City-St-Zip:

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

 Name:
 ESSICK, SHANAN T
 Name:

 Address:
 9850 OXFORD STATION DRIVE
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32221
 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: GREGORY A. ESSICK SR P 04/24/2006