

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001353

FILED
Mar 22, 2009
Secretary of State

Entity Name: THE NEW LATTER DAY DELIVERANCE MINISTRIES, INC.

Current Principal Place of Business:

3900 5TH AVE NORTH
ST PETERSBURG, FL 33712

New Principal Place of Business:

Current Mailing Address:

PO BOX 17051
SAINT PETERSBURG, FL 33733

New Mailing Address:

FEI Number: 38-3697870

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAWKINS, PASTOR VIVIAN
125 73RD AVENUE NORTH
SUITE #311
SAINT PETERSBURG, FL 33702 US

Name and Address of New Registered Agent:

THOMPSON, BISHOP VIVIAN H
2251 65 TERR. SOUTH
APT.451
SAINT PETERSBURG, FL 33712 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: VIVIAN HAWKINS THOMPSON

03/22/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: THOMAS, VIVIAN D
Address: 125 73RD AVE NORTH APT 311
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: V () Delete
Name: HAWKINS, JOYCE L
Address: 3900 5TH AVENUE, NORTH
City-St-Zip: SAINT PETERSBURG, FL 33711

Title: S () Delete
Name: REID, SHARIKA
Address: 3900 5TH AVENUE, NORTH
City-St-Zip: SAINT PETERSBURG, FL 33711

Title: TD () Delete
Name: SMITH, DRYNTHIA
Address: 3900 5TH AVENUE, NORTH
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: D () Delete
Name: JOHNNIE, WALKER
Address: 3900 5TH AVE NORTH
City-St-Zip: ST PETERSBURG, FL 33712

Title: D () Delete
Name: ST. JULIEN, CHRISTOPHER
Address: 3900 5TH AVENUE, NORTH
City-St-Zip: SAINT PETERSBURG, FL 33712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: THOMPSON, VIVIAN H
Address: 2251 65.TERR. SOUTH APT.451
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: V (X) Change () Addition
Name: THOMPSON, JAMES
Address: 2251 65 TERR. SOUTH APT.451
City-St-Zip: SAINT PETERSBURG, FL 33711

Title: S (X) Change () Addition
Name: LINK, SHARIKA
Address: 3900 5TH AVENUE, NORTH
City-St-Zip: SAINT PETERSBURG, FL 33711

Title: T (X) Change () Addition
Name: HAWKINS, JOYCE
Address: 3900 5TH AVENUE, NORTH
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: D (X) Change () Addition
Name: SMITH, ORYNTHIA
Address: 3900 5TH. AVE. N
City-St-Zip: ST PETERSBURG, FL 33712

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: VIVIAN H. THOMPSON

PRES

03/22/2009

Electronic Signature of Signing Officer or Director

Date