

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002043

FILED
Aug 28, 2007
Secretary of State

Entity Name: GRACE AND MERCY DELIVERANCE MINISTRIES INC.

Current Principal Place of Business:

1002 A. PHILLIP RANDOLPH BLVD
JACKSONVILLE, FL 32206

New Principal Place of Business:

Current Mailing Address:

6736 GASPAR CIRCLE WEST
JACKSONVILLE, FL 32219

New Mailing Address:

FEI Number: 20-0420886 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

DAISE, LORAINÉ
6736 GASPAR CIRCLE WEST
JACKSONVILLE, FL 32219 US

Name and Address of New Registered Agent:

DAISE, LORAINÉ A
6736 GASPAR CIRCLE WEST
JACKSONVILLE, FL 32219 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: LORAINÉ A. DAISE-FORD

08/28/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: DAISE, LORAINÉ
Address: 6736 GASPAR CIRCLE WEST
City-St-Zip: JACKSONVILLE, FL 32219

Title: DS () Delete
Name: NOISETTE, SHERLYN
Address: 3148 SEARCH WOOD DR
City-St-Zip: JACKSONVILLE, FL 32277

Title: DT () Delete
Name: FORD, RAY
Address: 6736 GASPAR CIRCLE W.
City-St-Zip: JACKSONVILLE, FL 32219

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: DAISE, LORAINÉ A
Address: 6736 GASPAR CIRCLE WEST
City-St-Zip: JACKSONVILLE, FL 32219

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 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: LORAINÉ A. DAISE-FORD

DP

08/28/2007

Electronic Signature of Signing Officer or Director

Date