

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002049

FILED
Jan 08, 2012
Secretary of State

Entity Name: THE DELIVERANCE CENTER, INC.

Current Principal Place of Business:

2915 NW 60TH AVE
211
SUNRISE, FL 33313

New Principal Place of Business:

Current Mailing Address:

2915 NW 60TH AVE
211
SUNRISE, FL 33313

New Mailing Address:

FEI Number: 57-1197284

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POITIER-LISCOMBE, SHERRIE MS
2915 NW 60TH AVENUE
211
SUNRISE, FL 33313 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: POITIER-LISCOMBE, SHERRIE
Address: 2915 NW 60TH AVE APT. 211
City-St-Zip: SUNRISE, FL 33313

Title: V
Name: LISCOMBE, GEDION A REV
Address: 2915 NW 60 TH AVE APT. 211
City-St-Zip: SUNRISE, FL 33313

Title: ST
Name: HALL, RHONYCE
Address: 21240 SW 97 AVE
City-St-Zip: MIAMI, FL 33189

I hereby 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 all other like empowered.

SIGNATURE: SHERRIE POITIER-LISCOMBE

P

01/08/2012

Electronic Signature of Signing Officer or Director

Date