2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005940

FILED Apr 14, 2005 Secretary of State

Entity Name: JESUS MIRACLES DELIVERANCE HOUSE OF PRAYER, INC.

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

10011 TAKOMATH TRAIL 6818 50 ST N TAMPA, FL 33617 TAMPA, FL 33610

Current Mailing Address: New Mailing Address:

10011 TAKOMATH TRAIL 10011 TAKOMAH TRAIL TAMPA, FL 33617 TAMPA, FL 33617

FEI Number: 02-0723454 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:

PARKER, BLACHE H ST 10011 TAKOMATH TRAIL 10011 TAKOMAH TRAIL TAMPA, FL 33617 US TAMPA, FL 33617 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: BLANCHE H PARKER 04/14/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PPT () Delete Title: PPT (X) Change () Addition

 Name:
 PARKER, WILLIAM J
 Name:
 PARKER, WILLIAM J

 Address:
 10011 TAKOMATH TRAIL
 Address:
 10011 TAKOMAH TRAIL

 City-St-Zip:
 TAMPA, FL 33617
 City-St-Zip:
 TAMPA, FL 33617

Title: ST () Delete Title: ST (X) Change () Addition Name: PARKER, BLANCHE H Name: PARKER, BLANCHE H

Address: 10011 TAKOMATH TRAIL Address: 10011 TAKOMAH TRAIL
City-St-Zip: TAMPA, FL 33617 City-St-Zip: TAMPA, FL 33617

Title: TT () Delete Title: () Change () Addition

 Name:
 KNIGHT, SAM
 Name:

 Address:
 510 VIRGINIA STREET
 Address:

 City-St-Zip:
 TAMPA, FL 33603
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BLANCHE H. PARKER ST 04/14/2005