

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006611

FILED
Mar 05, 2008
Secretary of State

Entity Name: FELLOWSHIP OF DELIVERANCE CHURCHES, INC.

Current Principal Place of Business:

6304 N. 30TH STREET
TAMPA, FL 33610 US

New Principal Place of Business:

Current Mailing Address:

6304 N. 30TH STREET
TAMPA, FL 33610 US

New Mailing Address:

FEI Number: 20-1336632

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOWELL, JOEL H
1406 E. MOHAWK AVE.
TAMPA, FL 33604 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 () Delete
Name: HOWELL, JAMES H
Address: 110 BARRINGTON DRIVE
City-St-Zip: BRANDON, FL 33511 US

Title: VP () Delete
Name: WHITE, MARCUS V
Address: 711 WINIFRED ROAD
City-St-Zip: LEESBURG, GA 31763 US

Title: S () Delete
Name: JACKSON, CAROLYN
Address: 6304 N 30TH ST
City-St-Zip: TAMPA, FL 33610 US

Title: T (X) Delete
Name: RANDALL, WILBERT
Address: 2531 JENNIFER DRIVE
City-St-Zip: LAKE LAND, FL 33810 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: RANDALL, WILBERT
Address: P O BOX 549
City-St-Zip: KATLHEEN, FL 33849 US

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: JAMES H HOWELL

P

03/05/2008

Electronic Signature of Signing Officer or Director

Date