

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 25, 2006 08:00 AM
Secretary of State

DOCUMENT # N04000009396

1. Entity Name
**PRAISE AND DELIVERANCE MINISTRIES
INTERNATIONAL, INC.**



Principal Place of Business
**4508 3RD ST CIR. W #505
BRADENTON, FL 34207**

Mailing Address
**PO BOX 593
BRADENTON, FL 34206**



01072006 No Chg-NP

CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1710603

Applied For
Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**TIMES, YVONNIE M
311 16TH STREET WEST
PALMETTO, FL 34221**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution.



**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**P
TIMES, SHELDON L
4480 IRONWOOD CIRCLE, #311-A
BRADENTON, FL 34209**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VD
TIMES, YVONNIE M
311 16TH ST WEST
PALMETTO, FL 34221**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**TD
STRONG, FELICIA L
224 11TH AVENUE EAST
BRADENTON, FL 34208**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**SD
RAMSEY, MARI H
4508 3RD ST CIR. W #505
BRADENTON, FL 34207**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

U00000401925
02/02/06-80065-008 70.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/06

941-232-3841

Date

Daytime Phone #