## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0400009880

Entity Name: UNIVERSAL DELIVERANCE CHURCH OF ORLANDO, INC

Current Principal Place of Business:	New Principal Place of Business:		
4055 CHADDYBROOK CT ORLANDO, FL, FL 32839 US	5412 WOOD CROSSING ST ORLANDO, FL, FL 32811 US		
Current Mailing Address:	New Mailing Address:		
1033 KIRKMAN RD #109 ORLANDO, FL 32839 US	1033 KIRKMAN RD #109 ORLANDO, FL 32811 US		
FEI Number: 03-0543689 FEI Number Applied For ( )	FEI Number Not Applicable () Certificate of Status Desired (X)		
Name and Address of Current Registered Agent	: Name and Address of New Registered Agent:		
HILBERT, DANIELA DEACON 4055 CHADDYBROOK CT ORLANDO, FL 32839 US	HILBERT, DANIEL DEACON 5412 WOOD CROSSING ST ORLANDO, FL 32811 US		

FILED Feb 01, 2005 Secretary of State

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: DANIEL HILBERT		02/01/2005	
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title:	PRES () Delete	Title:	PRES (X) Change ( ) Addition
Name:	HILBERT, SHIRLEY A	Name:	HILBERT, SHIRLEY A
Address:	4055 CHADDYBROOK CT	Address:	5412 WOOD CROSSING
City-St-Zip:	ORLANDO, FL 32839 US	City-St-Zip:	ORLANDO, FL 32811 US
Title:	TREA () Delete	Title:	() Change () Addition
Name:	HILBERT, DANIELA O	Name:	
Address:	1033 S. KIRKMAN RD #109	Address:	
City-St-Zip:	ORLANDO, FL 32811 US	City-St-Zip:	
Title:	TRUS () Delete	Title:	() Change () Addition
Name:	PATTERSON, DEWAYNE B	Name:	
Address:	2001 BUCHANAN BAY CR #105	Address:	
City-St-Zip:	ORLANDO, FL 32839 US	City-St-Zip:	
Title:	() Delete	Title:	DEAC () Change (X) Addition
Name:		Name:	HILBERT, DANIEL
Address:		Address:	5412 WOOD CROSSING ST
City-St-Zip:		City-St-Zip:	ORLANDO, FL 32811

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:	SHIRLEY HILBERT	PRES	02/01/2005
	Electronic Signature of Signing Officer or Director		Date