2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009880

FILED Apr 30, 2009 Secretary of State

Entity Name: UNIVERSAL DELIVERANCE CHURCH OF ORLANDO, INC

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

3621 W COLUMBIA ST ORLANDO,, FL 32805 US

Current Mailing Address: New Mailing Address:

PO BOX 618647

ORLANDO, FL 32861 US

FEI Number: 03-0543689 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:

HILBERT, DANIELA O TREASUR
2674 ROBERT TRENT JONES DR
617
ORLANDO, FL 32819 US
HILBERT, DANIELA O TREASUR
5497 TIMBERLEAF BLVD
1509
ORLANDO, FL 32811 US

ORLANDO, FL 32019 US ORLANDO, FL 32011 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: DANIELA O HILBERT 04/30/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Delete Title: () Change () Addition

 Name:
 HILBERT, SHIRLEY A
 Name:

 Address:
 5497 TIMERLEAF BLVD #1509
 Address:

 City-St-Zip:
 ORLANDO, FL 32811 US
 City-St-Zip:

Title: DEA () Delete Title: () Change () Addition

 Name:
 HILBERT, DANIEL
 Name:

 Address:
 5497 TIMBERLEAF BLVD #1509
 Address:

 City-St-Zip:
 ORLANDO, FL 32811 US
 City-St-Zip:

Title: TREA () Delete Title: TREA (X) Change () Addition

Name: HILBERT, DANIELA O Name: HILBERT, DANIELA O
Address: 2674 ROBERT TRENT JONES DR #617 Address: 5497 TIMBERLEAF BLVD #1509

City-St-Zip: ORLALNDO, FL 32819 City-St-Zip: ORLALNDO, FL 32811

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: DANIELA O HILBERT TREA 04/30/2009