

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04811

FILED
Feb 07, 2008
Secretary of State

Entity Name: EVANGELISTIC DELIVERANCE MINISTRY, INC.

Current Principal Place of Business:

111 HARLEE STREET
MARION, SC 29571 US

New Principal Place of Business:

123 HARLEE STREET
MARION, SC 29571 US

Current Mailing Address:

612 PEARL STREET
MARION, SC 29571 US

New Mailing Address:

PO BOX 517
SCRANTON, SC 29591 US

FEI Number: 02-0750623

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JONES, DAVID A
5440 CALLOWAY COURT
JACKSONVILLE, FL 32209 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: PAST () Delete
Name: JONES, DAVID A
Address: 5440 CALLOWAY COURT
City-St-Zip: JACKSONVILLE, FL 32209

Title: APAS () Delete
Name: JONES, ARHALIA B
Address: 5440 CALLOWAY COURT
City-St-Zip: JACKSONVILLE, FL 32209

Title: T () Delete
Name: JONES, ARHALIA
Address: 5440 CALLOWAY COURT
City-St-Zip: JACKSONVILLE, FL 32209

Title: S () Delete
Name: WALKER, JANETTE
Address: 235 DIXON ST
City-St-Zip: MULLINS, SC 29574

Title: DEAC (X) Delete
Name: DEWITT, GAIL
Address: 308 LINCOLN PLACE
City-St-Zip: MULLINS, SC 29574

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: DAVID A. JONES

PAST

02/07/2008

Electronic Signature of Signing Officer or Director

Date