

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005275

FILED  
Jan 29, 2009  
Secretary of State

**Entity Name:** TABERNACLE OF DELIVERANCE MINISTRIES, INC.

**Current Principal Place of Business:**

405 E. DRAIN ST.  
BUNNELL, FL 32110 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 279  
BUNNELL, FL 32110 US

**New Mailing Address:**

**FEI Number:** 55-0914565

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BROOKS, NATHANIEL  
100 BIG BEN DR  
DAYTONA BEACH, FL 32117 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: BROOKS, NATHANIEL  
Address: 100 BIG BEN DR  
City-St-Zip: DAYTONA BEACH, FL 32117 US

Title: V ( ) Delete  
Name: BROOKS, SHELLEY A  
Address: 100 BIG BEN DR  
City-St-Zip: DAYTONA BEACH, FL 32117 US

Title: ST ( ) Delete  
Name: NELSON, JACQUELINE  
Address: P. O BOX 1485  
City-St-Zip: BUNNELL, FL 32110 US

**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:

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: NATHANIEL BROOKS

P

01/29/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date