

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006181

FILED  
Apr 20, 2007  
Secretary of State

**Entity Name:** ONE HEART ONE SOUL DELIVERANCE MINISTRIES, INC.

**Current Principal Place of Business:**

3907 LAKESIDE RESERVE LN  
ORLANDO, FL 32810

**New Principal Place of Business:**

3915 ROSEWOOD WAY  
ORLANDO, FL 32808

**Current Mailing Address:**

3907 LAKESIDE RESERVE LN  
ORLANDO, FL 32810

**New Mailing Address:**

3915 ROSEWOOD WAY  
ORLANDO, FL 32808

**FEI Number:** 01-0869529

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COLLIER, TONY W  
3907 LAKESIDE RESERVE LN  
ORLANDO, FL 32810 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: COLLIER, TONY W  
Address: 3907 LAKESIDE RESERVE LN  
City-St-Zip: ORLANDO, FL 32810

Title: V ( ) Delete  
Name: COLLIER, NARITTA  
Address: 3907 LAKESIDE RESERVE LN  
City-St-Zip: ORLANDO, FL 32810

Title: S ( ) Delete  
Name: GALLAGHER, DAVID  
Address: 3428 PORTER FIELD RD  
City-St-Zip: ORLANDO, FL 32808

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

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

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

Title: S (X) Change ( ) Addition  
Name: GALLAGHER, DAVID  
Address: 3915 ROSEWOOD WAY  
City-St-Zip: ORLANDO, FL 32808

I hereby certify that the information supplied with this filing does not qualify for the 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: NARITTA C. COLLIER

V

04/20/2007

Electronic Signature of Signing Officer or Director

Date