2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2009
Secretary of State

DOCUMENT# N06000006181

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

Current Principal Place of Business:

3915 ROSEWOOD WAY
ORLANDO, FL 32808

New Principal Place of Business:

Current Mailing Address:

3915 ROSEWOOD WAY
ORLANDO, FL 32808

New Mailing Address:

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 PASTOR
Address: 3907 LAKESIDE RESERVE LN
City-St-Zip: ORLANDO, FL 32810

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

Title: S ( ) Delete
Name: BOLES, ANDREA SEC.
Address: 3915 ROSEWOOD WAY
City-St-Zip: ORLANDO, FL 32808

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition
Name: COLLIER, TONY W PASTOR
Address: 3907 LAKESIDE RESERVE LN
City-St-Zip: ORLANDO, FL 32810

Title: COO (X) Change ( ) Addition
Name: COLLIER, NARITTA C CO-PAST
Address: 3907 LAKESIDE RESERVE LN
City-St-Zip: ORLANDO, FL 32810

Title: AS (X) Change ( ) Addition
Name: BOLES, ANDREA ADM SEC
Address: 3915 ROSEWOOD WAY
City-St-Zip: ORLANDO, FL 32808

Title: TREA ( ) Change (X) Addition
Name: BLANC, MICHAEL TREASUR
Address: 3915 ROSEWOOD WAY
City-St-Zip: ORLANDO, FL 32808

Title: TREA ( ) Change (X) Addition
Name: HALL, LORETTA TREASUR
Address: 3915 ROSEWOOD WAY
City-St-Zip: ORLANDO, FL 32808

Title: AS ( ) Change (X) Addition
Name: JOHNSON, SHEILIA AST/SEC
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 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 COO 04/21/2009

Electronic Signature of Signing Officer or Director — Date