

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008568

FILED  
Apr 22, 2012  
Secretary of State

**Entity Name:** FAITH LIFE DELIVERANCE MINISTRIES,INC.

**Current Principal Place of Business:**

250 NORTH WEST 31 AVE  
POMPANO BEACH, FL 33069 BR

**New Principal Place of Business:**

**Current Mailing Address:**

7080 ENVIRON BLVD  
STE 221  
LAUDERHILL, FL 33319 BR

**New Mailing Address:**

**FEI Number:** 72-1619810      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

MOBLEY, SAMUEL SR.  
7080 ENVIRON BLVD  
STE 221  
LAUDERHILL, FL 33319 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  
Name: MOBLEY, SAMUEL SR.  
Address: 7080 ENVIRON BLVD STE 221  
City-St-Zip: LAUDERHILL, FL 33319 BR

Title: VP  
Name: MOBLEY, FRANCES S  
Address: 7080 ENVIRON BLVD STE 221  
City-St-Zip: LAUDERHILL, FL 33319 BR

Title: SEC.  
Name: PRINCE, CORNESA  
Address: 2061 W ATLANTIC BLVD # 112  
City-St-Zip: POMPANO BEACH, FL 33069 BR

Title: TRE.  
Name: HAYNES, ANNETTE  
Address: 3361 NW 7TH CT  
City-St-Zip: LAUDERHILL, FL 33311

I hereby 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 all other like empowered.

SIGNATURE: SAMUEL MOBLEY SR

P

04/22/2012

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

\_\_\_\_\_  
Date