FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N06915 1. Corporation Name

HOLY GHOST FREE DELIVERANCE CHURCH OF JESUS, INC

Principal Place of Business % LAUREATHA SWAN 1421 NW 32ND TERRACE FT LAUDERDALE FL 33311

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

22

23

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

28

% LAUREATHA SWAN 1421 NW 32ND TERRACE FT LAUDERDALE FL 33311

FILED Feb 10, 1999 8:00am **Secretary of State**

02-10-1999 90021 045 ****61.25

Applied For

\$8.75 Additional

Fee Required

Not Applicable

3. Date incorporated or Qualifed

5. Certificate of Status Desired

01/21/1985

52-1395453

4. FEI Number

Zip	Country	L Zip _	Country		6. Election Camp	· · · · · ·	\$5.00 N	•			
24	25 29 30			Trust Fund Contribution Added to Fees							
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent						
			81	Name	ı						
SWAN, LAUREATHA				82 Street Address (P.O. Box Number is Not Acceptable)							
1421 NW 32ND TERRACE			"	oz Street Address (F. O. Box Number is Not Acceptable)							
FT LAUDERDALE FL 33311			83								
FI LAUDE	NUALE PL 33311			ļ							
			84	City		FL	85 Zip C	ode			
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, a manufacture of the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.											
SIGNATURE	Signature, typed or printed name of registered agent ar	nd title if applicable. (NOTE: F	Registered Age	int signature requ	ired when reinstating)	DATE					
12. OFFICERS AND DIRECTORS 1					ADDITIONS/CH	ANGES TO OFFICERS A	ND DIRECTOR	RS IN 12			
TITLE	PD	☐ DELETE	1.1 TITLE				Change	☐ Addition			
NAME	SWAN, LAUREATHA (PASTOR)		1.2 NAME					·			
STREET ADDRESS	1421 NW 32ND TERRACE		1.3 STREE	T ADDRESS	:						
CITY-ST-ZIP	FT LAUDERDALE FL	_	1.4 CITY-5	ST-ZIP							
TITLE	SD	☐ DELETE	2.1 TITLE				Change	☐ Addition			
NAME	GRAHAM, VIVIAN		2.2 NAME			÷					
STREET ADDRESS	404 NE 4TH ST, APT 1		2.3 STREE	TADDRESS							
CITY-ST-ZIP	POMPANO BEACH FL		2.4 CITY-	ST-ZIP							
TITLE	TD	☐ DELETE	3.1 TITLE				Change	Addition			
NAME AND IS	GRAY, JERRY		3.2 NAME								
STREET ADDRESS	1421 NW 32ND TERRACE		3.3 STREE	TADORESS	•	•					
CITY-ST-ZIP	FT LAUDERDALE FL		3.4. CITY-	ST-ZIP	- ···		<u> </u>				
TITLE	D	☐ DELETE	4.1 TITLE				, 🔲 Change	☐ Addition			
NAME .	GRAY, LOUIS		4. 2 NAME		,	i Lington to egy	u Halfeta Bright I	it item			
STREET ADDRESS	1421 NW 32ND TERRACE		4.3 STREE	T ADDRESS				genig .			
CITY: ST-ZIP	FT LAUDERDALE FL		4.4 CITY-5	ST-ZIP		<u> </u>		(37.53)			
TITLE		DELETE	5.1 TITLE				Change	Addition			
NAME			5.2 NAME				4				
STREET ADDRESS				T ADDRESS			•				
CITY-ST-ZIP			5.4 CITY-1	ST-ZIP							
TITLE		☐ DELETE	6.1 TITLE				Change	Addition			
NAME			6.2 NAME	ľ							
STREET ADDRESS			1	T ADDRESS							
CITY-ST-ZIP			6.4 CITY-	ST-ZIP	y .						
					- Castino 440 07/91/1\ E	lorida Statutee I further co					

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE;