

2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000005482

FILED
Feb 17, 2014
Secretary of State

Entity Name: GREATER NEW DELIVERANCE INTERNATIONAL MINISTRIES, INC

Current Principal Place of Business:

2544 S PARK DRIVE
SANFORD, FL 32773

New Principal Place of Business:

139 BOB THOMAS CIRCLE
SANFORD, FL 32771

Current Mailing Address:

PO BOX 185
SANFORD, FL 327720185

New Mailing Address:

139 BOB THOMAS CIRCLE
SANFORD, FL 32771

FEI Number: 30-0316798

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WELLON-DAMES, OLETHA G
1316 S PERSIMMON AVE
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

WELLON-DAMES, OLETHA G
139 BOB THOMAS CIRCLE
SANFORD, FL 32771 US

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: OLETHA G. WELLON-DAMES

02/17/2014

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PCEO
Name: DAMES, QUINTON L SR
Address: 139 BOB THOMAS CIRCLE
City-St-Zip: SANFORD, FL 32771

Title: VP
Name: WELLON-DAMES, OLETHA G
Address: 139 BOB THOMAS CIRCLE
City-St-Zip: SANFORD, FL 32771

Title: T
Name: JACKSON-WALKER, NATARSHA C
Address: 216 YALE DRIVE
City-St-Zip: SANFORD, FL 32771

Title: S
Name: DEBOSE, DASHAWN
Address: 106 BOB THOMAS
City-St-Zip: SANFORD, FL 32771

Title: D
Name: CLARY, JANET
Address: 2212 ST. MARKS STREET
City-St-Zip: TALLAHASSEE, FL 32310

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: OLETHA G. WELLON-DAMES

VP

02/17/2014

Electronic Signature of Signing Officer or Director

Date