2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002225

FILED Apr 30, 2009 Secretary of State

Entity Name: WATER OF LIFE DELIVERANCE MINISTRY, INC.

Current Principal Place of Business: New Principal Place of Business:

5833 WEST OAKLAND PARK BLVD. #173

LAUDERHILL, FL 33313

Current Mailing Address: New Mailing Address:

5833 WEST OAKLAND PARK BLVD. #173

LAUDERHILL, FL 33313

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

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

FULLER ACCOUNTING & MANAGEMENT SERVICES

3365 N.W. 32ND COURT 5833 WEST OAKLAND PARK BLVD.

LAUDERDALE LAKES, FL 33309 US #173 LAUDERHILL, FL 33313 US

LAUDERHILL, FL 33313 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.

BLAGROVE, BEVERLY

SIGNATURE: BEVERLY BLAGROVE 04/30/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: DP (X) Change () Addition Name: BLAGROVE, BEVERLY DP (X) Change () Addition Name: BLAGROVE, BEVERLY

 Name:
 SEASICOVE, BEVERET

 Address:
 5880 NW3 18TH COURT
 Address:
 5880 NW 18TH COURT

 City-St-Zip:
 SUNRISE, FL 33313
 City-St-Zip:
 SUNRISE, FL 33313

Title: VTD () Delete Title: VP (X) Change () Addition Name: BLAGROVE, OWEN Name: BLAGROVE, OWEN

 Name
 BLAGROVE, OWEN
 Name
 BLAGROVE, OWEN

 Address:
 1181 SUNSET STRIP
 Address:
 1181 SUNSET STRIP

 City-St-Zip:
 SUNRISE, FL 33313
 City-St-Zip:
 SUNRISE, FL 33313

Title: () Delete Title: (X) Change () Addition SIMS, PETULAH SMITH, HARTWELL TRUSTEE Name: Name: 1677 NW 60TH AVE Address: Address: 1170 SUNSET STRIP City-St-Zip: SUNRISE, FL 33313 City-St-Zip: SUNRISE, FL 33313

Title: D (X) Delete Title: () Change () Addition

 Name:
 SMITH, HARTWELL TRUSTEE
 Name:

 Address:
 1170 SUNSET STRIP
 Address:

 City-St-Zip:
 SUNRISE, FL 33313
 City-St-Zip:

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: BEVERLY BLAGROVE P 04/30/2009