

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003482

FILED  
Jan 07, 2009  
Secretary of State

**Entity Name:** UNDER THE BLOOD HOUSE OF PRAYER, A DELIVERANCE CENTER, INC.

**Current Principal Place of Business:**

3000 N. FLORIDA AVENUE  
TAMPA, FL 33603

**New Principal Place of Business:**

3000 N. FLORIDA AVENUE  
TAMPA, FL 33603 US

**Current Mailing Address:**

3000 N. FLORIDA AVENUE  
TAMPA, FL 33603

**New Mailing Address:**

3000 N. FLORIDA AVENUE  
TAMPA, FL 33603 US

**FEI Number:** 51-0675315

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

NEAL, BARBARA J ELDER  
5131 CULPEPPER PL  
WESLEY CHAPEL, FL 33544 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: NEAL, BARBARA J ELDER  
Address: 5131 CULPEPPER PL  
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: VT ( ) Delete  
Name: SHANNON, VANESSA W  
Address: 5610 GRANADA BLVD UNIT C  
City-St-Zip: TAMPA, FL 33617

Title: S ( ) Delete  
Name: GRANT, MELISSA E  
Address: 824 WESTMINSTER BLVD.  
City-St-Zip: OLDSMAR, FL 34677

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

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: NEAL, BARBARA J ELDER  
Address: 5131 CULPEPPER PL  
City-St-Zip: WESLEY CHAPEL, FL 33544 US

Title: VP (X) Change ( ) Addition  
Name: SHANNON, EDDIE L ELDER  
Address: 10014 LOLA ST  
City-St-Zip: TAMPA, FL 33612 US

Title: T (X) Change ( ) Addition  
Name: GRANT, MELISSA E  
Address: 1907 ALBANY AVE  
City-St-Zip: TAMPA, FL 33607 US

Title: S ( ) Change (X) Addition  
Name: ANDERSON, SONIA  
Address: 802 COLUMBUS DR  
City-St-Zip: TAMPA, FL 33602 US

Title: VS ( ) Change (X) Addition  
Name: JONES, BAMBI E  
Address: 2230 NURSERY ROAD APT G79  
City-St-Zip: CLEARWATER, FL 33764 US

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:** ELDER BARBARA NEAL

P

01/07/2009

Electronic Signature of Signing Officer or Director

Date