

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003482

FILED
Jun 22, 2010
Secretary of State

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

Current Principal Place of Business:

3012 N. 22ND STREET
TAMPA, FL 336051914 US

New Principal Place of Business:

3012 N 22ND STREET
TAMPA, FL 336051914 US

Current Mailing Address:

3012 N. 22ND STREET
TAMPA, FL 336051914 US

New Mailing Address:

FEI Number: 51-0675315 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

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

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

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

Title: S
Name: ANDERSON, SONIA
Address: 802 COLUMBUS DR
City-St-Zip: TAMPA, FL 33602 US

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

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: ELDER BARBARA J. NEAL

E

06/22/2010

Electronic Signature of Signing Officer or Director

Date