2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007916

FILED Apr 29, 2009 Secretary of State

Entity Name: DELIVERANCE OUTREACH HOLINESS OF THE APOSTOLIC FAITH CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business: 3010 N. 46TH STREET TAMPA, FL 33605 **Current Mailing Address: New Mailing Address:** 3010 N. 46TH STREET TAMPA, FL 33605 FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TAYLOR, LASONJA ANDERSON, JUANITA 3010 N. 46TH STREET 5101 JANES DRIVE US TAMPA, FL 33605 WIMAUMA, FL 33598 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: JAUNITA ANDERSON 04/29/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete ANDERSON, JUANITA Name: Name: 3010 N. 46TH STREET Address: Address: City-St-Zip: TAMPA, FL 33605 City-St-Zip: Title: D/S () Delete Title: () Change () Addition NORTHERN, AZZIE Name: Name: Address: 5204 84TH STREET S. Address: City-St-Zip: TAMPA, FL 33619 City-St-Zip: Title: () Delete Title: () Change () Addition HEMINGWAY, PAULINE Name: Name: 4511 N. 39TH STREET Address: Address: City-St-Zip: TAMPA, FL 33610 City-St-Zip: Title: () Delete Title: () Change () Addition Name: NORTHERN, EDRECKA Name: Address: 10301 RETAS COVE Address: City-St-Zip: RIVERVIEW, FL 33578 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: JUANITA ANDERSON P 04/29/2009