

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010242

FILED
Mar 29, 2009
Secretary of State

Entity Name: REVEALING WORD DELIVERANCE CENTRE INC.

Current Principal Place of Business:

7342 NW 48TH STREET
LAUDERHILL, FL 33319 US

New Principal Place of Business:

Current Mailing Address:

7342 NW 48TH STREET
LAUDERHILL, FL 33319 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

DURAND, SHARLENE
953 SW 93RD TERRACE
PLANTATION, FL 33324 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: WHYTE, RUDOLPH
Address: 7342 NW 48TH STREET
City-St-Zip: LAUDERHILL, FL 33319 US

Title: TREA () Delete
Name: DURAND, SHARLENE
Address: 953 SW 93RD TERRACE
City-St-Zip: PLANTATION, FL 33324

Title: SEC () Delete
Name: BASDEN, MARVIA
Address: 8800 HIGH POINT CIRCLE
City-St-Zip: LOUISVILLE, KY 40299 US

Title: VP () Delete
Name: WHYTE, JOAN
Address: 7342 NW 48TH STREET
City-St-Zip: LAUDERHILL, FL 33319 US

Title: AVP () Delete
Name: COOPER, JUDITH
Address: 34BUCKSBURN ROAD
City-St-Zip: ETOBICOKE, ON M9B 3V3 CN

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SEC (X) Change () Addition
Name: EVANS, CECIL
Address: 2790 SILVERIDGE DRIVE
City-St-Zip: ORLANDO, FL 32818 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: AVP (X) Change () Addition
Name: COOPER, JUDITH
Address: 34 BUCKSBURN ROAD
City-St-Zip: ETOBICOKE, ON M9B 3V3 CN

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: RUDOLPH WHYTE

PD

03/29/2009

Electronic Signature of Signing Officer or Director

Date