

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000002841

FILED
Apr 04, 2012
Secretary of State

Entity Name: DELIVERANCE OUTREACH MINISTRIES, INC.

Current Principal Place of Business:

1022 WEST EUCLID AVENUE
DELAND, FL 32720

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 1618
DELAND, FL 32721

New Mailing Address:

FEI Number: 26-4500114

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONROE, ALICIA M
1022 WEST EUCLID AVENUE
DELAND, FL 32720 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: MONROE, ALICIA M
Address: 1022 WEST EUCLID AVENUE
City-St-Zip: DELAND, FL 32720

Title: D
Name: MONROE, ROBERT L
Address: 1022 WEST EUCLID AVENUE
City-St-Zip: DELAND, FL 32720

Title: D
Name: JOHNSON, WILLIE SR
Address: 1060 EAST NORMANDY BLVD.
City-St-Zip: DELTONA, FL 32725

Title: D
Name: MILLER, RONALD J
Address: 2649 ACADEMY AVENUE
City-St-Zip: DELTONA, FL 32738

Title: T
Name: BURNELL, TERI Y
Address: 7206 AMERICUS LANE
City-St-Zip: LAND O' LAKES, FL 34637

Title: S
Name: MILLER, NAKESHA
Address: 2649 ACADEMY AVENUE
City-St-Zip: DELTONA, FL 32738

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: ALICIA M. MONROE

P

04/04/2012

Electronic Signature of Signing Officer or Director

Date