

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Sep 19, 2010
Secretary of State

Entity Name: HEALING AND DELIVERANCE TEMPLE II INC

Current Principal Place of Business:

5076 BROOKS ACRES CIRCLE
TAMPA, FL 33610

New Principal Place of Business:

3801 NORTH 29TH STREET
TAMPA, FL 33610

Current Mailing Address:

5076 BROOKS ACRES CIRCLE
TAMPA, FL 33610

New Mailing Address:

FEI Number: 35-2375173

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MONTS, FANNIE
5076 BROOKS ACRES CIRCLE
TAMPA, FL 33610 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: A
Name: MONTS, FANNIE
Address: 5076 BROOKS ACRES CIRCLE
City-St-Zip: TAMPA, FL 33610

Title: P
Name: WOOD, TONY SR
Address: 10237 HUNTERS HAVEN BLVD
City-St-Zip: RIVERVIEW, FL 33578

Title: S
Name: WOODS, SHARENA
Address: 10237 HUNTERS HAVENS BLVD
City-St-Zip: RIVERVIEW, FL 33610

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: SHARENA WOODS

S

09/19/2010

Electronic Signature of Signing Officer or Director

Date