

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000008899

**FILED**  
**Jan 18, 2012**  
**Secretary of State**

**Entity Name:** MISSION IS POSSIBLE DELIVERANCE MINISTRIES, INC

**Current Principal Place of Business:**

4315 NW 167TH STREET  
MIAMI GARDENS, FL 33055

**New Principal Place of Business:**

**Current Mailing Address:**

3401 NW 188TH STREET  
MIAMI, FL 33056

**New Mailing Address:**

**FEI Number:** 45-3337510

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

POLK, SANDRA H  
2931 NW 158 STREET  
MIAMI, FL 33054 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:** POLK, SANDRA Y  
**Address:** 2931 NW 158TH STREET  
**City-St-Zip:** MIAMI GARDENS, FL 33054

**Title:** VP  
**Name:** POLK, LEWIS C  
**Address:** 3401 NW 188TH STREET  
**City-St-Zip:** MIAMI GARDENS, FL 33056

**Title:** S  
**Name:** ELDER, DEBRA  
**Address:** 17620 NW 41ST AVENUE  
**City-St-Zip:** MIAMI, FL 33055

**Title:** T  
**Name:** HOSTICK, DOROTHY  
**Address:** 3921 NW 168TH TERRACE  
**City-St-Zip:** MIAMI, FL 33055

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:** SANDRA POLK

P

01/18/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date