## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

N20035

(4)

## THE PEOPLE'S CHURCH OF DELIVERANCE INC.

						- 1					
Principal Place of Business Mailing Address							4 IE <b>tiliai dia</b> mampadia <b>dala</b> mata	Bill Bibli Bibli	i <b>Dau</b> ah didiri	ONDI OLDI UBBI	
1386 6TH ST 1282 42 ST. SARASOTA FL 34236		% JOE L. WIGGS 1282 42 ST. SARASOTA FL 34234-4618	1282 42 ST.								
US							3. Date Incorporated or Qualified 04/07/1987		of Last F 2/07/19		
2. Principal Pl	lace of Business	2a. Mailing Address 26					4. FEI Number 59-2803212		h	pplied For ot Applicable	
Suite, Apt. i	#, etc.	Suite, Apt. #, etc.					5. Certificate of Status Desired			Additional equired	
City & State	)	City & State					Election Campaign Financing     Trust Fund Contribution		-	May Be to Fees	
Zip	* Country	Zıp	Cou	intry			8. This corporation has liability for i		ax under s		
24	25 29  Name and Address of Current Registered Agent						Florida Statutes Yes Yes You				
	9. Name and Address of Curre	nt Hegistered Agent		81	Name		O. Name and Address of New He	pistered A	jent		
ANGOE	INE I					· · ·					
WIGGS, 1282 421		82 Street Add			Address	(P.O. Box Number is Not Acceptab	le)				
	ND 51 OTA FL 34234			83		3.				<del></del>	
W # = 10 =	IN I E VIEW		.		O3.,				1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		
				84	City			FL		Code	
11. Pursuant to	to the provisions of Sections 617.050 egistered agent, or both, in the State	32 and 617.1508, Florida Statutes	s, the at	POVE	-named	corpora	tion submits this statement for the p	urpose of c	hanging in	ts registered	
agent. I ar	m familiar with, and accept the oblig	ations of, Section 617.0503, Flor	ida Stat	utes	rue corp	porations	s board or directors, i hereby accep	it the appoi	ntment as	registered	
SIGNATURE							·	· <u>· · · · · · · · · · · · · · · · · · </u>			
	Signature, typed or printed name of registered ag			d Ager	nt signature	e required wt	hen reinstating)	DATE	·		
12.	T UFFICENS AN	ID DIRECTORS DELETE	13.	YI £		T	ADDITIONS/CHANGES TO OFFIC		Change	RS IN 12	
NAME	WIGGS, JOE L.	PALLIE	1.2 NA					-	_ Ulanyo	L Abouton	
STREET ADDRESS	2221 JANIE POE DRIVE				ADDRESS					ļ	
CITY-\$T-ZIP	SARASOTA FL		•	TY-ST							
TITLE	1	☐ DELETE	2.1 Til		* EN	<del>                                     </del>			Change	Addition	
NAME	NEWSOME, RICKY			2.2 NAME							
STREET ADDRESS	1722 5TH ST APT A		2.3 STREET AODRESS								
CITY-ST-ZIP	SARASOTA FL		2.4 C	ITY-S	T-ZIP						
TITLE	T DELETE			TLE					Change	Addition	
NAME	WIGGS, EVA N.		3.2 NA								
STREET ADDRESS	2221 JANIE POE DRIVE				ADORESS						
CITY-ST-ZIP	SARASOTA FL T DELETE			ITY-SI	T-ZIP	<u> </u>		<del></del>	Channe	a delition	
TITLE	MCKNIGHT, JR. L	NO DEFETE	4.1 TIT			TASL	well to I was	i.	Change	L. Addition	
NAME STREET ADDRESS	1839 19 STREET		4.2 N/		+5000000	MEN	wight, Jr. Lensy 1 18th St. Asota FL.				
CITY-ST-ZIP	SARASOTA FL			IKEE! / ITY-ST	ADDRESS	1914	/{***37\				
TITLE	ON PROVINCE	☐ DELETE	5.1 TIT		- LIF	JAYG	COTH FLI		Change	Addition	
NAME		_	5.2 NA					-			
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP			5.4 CI	TY-ST	i - ZIP						
TITLE		DELETE	6.1 ТП	rle					Change	Addition Addition	
NAME			6.2 NA	ME							
STREET ADDRESS			6.3 ST	REET /	ADDRESS		•				
CITY-ST-ZIP			6,4 CI1	TY-ST	- ZIP						
information	by certify that the information supplier in indicated on this annual report or t	sunniemental annual report is tou	IR ANN A	ACCUM	rata and	that mu	eignature chall have the came fenci	l affact ac if	mede un	vior opthithat	
I am an off appears in	ficer or director of the corporation of a Block 12 or Block 13 if changed, o	r the receiver or trustee empower or on an attachment with an addri	red to e ess.	Xecu	ute this re	report as	required by Chapter 617, Florida St	atutes; and	i that my r	name	

**FILED** 

Feb 04 1997 8:00am

Secretary of State