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 # N23789

(3)

VOICE OF ETERNAL DELIVERANCE, INC.

Principal Place	e of Business	Mailing A	Mailing Address) (300) 010 10003 11111 10407 (3110)	āti Alfii alalı star	A BIBIL DIA	ist minit rant	
RT.7. BOX 3686 LAKE CITY FL :			RT.7, BOX 3688 LAKE CITY FL 32055-8703						,			
								3. Date Incorporated or Qualified 12/08/1987	3a. Date of 01/2	Last Re 26/199	port 6	
2. Principal Pi	lace of Business	2a. Mailin 26	2a. Mailing Address 26					4. FEI Number NOT APPLICABLE			plied For t Applicable	
Suite, Apt.		27						5. Certificate of Status Desired	<u> </u>	8.75 A Fee Re	dditional quired	
City & State	e	City & 28	City & State					Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip 24	Country (25)	Zip 29	¬ '		Country			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No				
24	9. Name and Address of Curre		Agent	1301	1			10. Name and Address of New Re				
			···		81	Name						
HARRY, REV. LORETTA RT.7, BOX 368B					82	Street	Addres	dress (P.O. Box Number is Not Acceptable)				
	TY FL 32055											
					84	City			FL 85	Zip (Code	
office or re	to the provisions of Sections 617.05 egistered agent, or both, in the Stat m familiar with, and accept the obli-	te of Florida. Suc	h change was	authorize	ed by	the corp	corpo poratio	ration submits this statement for the p n's board of directors. I hereby accep	urpose of cha	nging its nent as	s registered registered	
SIGNATURE												
Signature, typed or printed name of registered agent and title if applicable. (NOTE: R						n) signature	required	when reinstating)	DATE			
12.		ND DIRECTORS		13.				ADDITIONS/CHANGES TO OFFIC				
TITLE	0			1.1 TITLE					البا	Change	Addition	
NAME	HARRY, LORETTA				AME							
STREET ADDRESS	RT.7, BOX 368B					address						
CiTY-ST-ZIP	LAKE CITY FL		DELETE		ITY-S	T-ZIP				Chanan	Addition	
TITLE	D CHAMPERS (ORDANIA		_		2.1 TITLE				ш,	Change	Addition	
NAME	CHAMBERS, JORDAINA				AME							
STREET ADDRESS	RT.2, BOX 77					ADDRESS	1					
CITY-ST-ZIP	LAKE BUTLER FL		DELETE		CITY - S	ST-ZIP	 			Change	Addition	
TITLE	D MULLEDO DUONDA		LL DECEIE		ITLE				ا لــا	nigirije	MOUNTON	
NAME	MULLERS, RHONDA				VAME		1					
STREET ADDRESS	RT. 2 BOX 77-B LAKE BUTLER FL					ADDRESS	ĺ					
CITY-ST-ZIP TITLE	LAKE BUILER FL		DELETE		CITY-S TITLE	ST - ZIP	 -		————	Change	Addition	
			_ occen						w	онаную.		
NAME				- 1	NAME							
STREET ADDRESS						ADDRESS						
CITY-ST-ZIP TITLE			DELETE	5.1	OTY-S	1 - 211				Change	Addition	
Ì			Tad Ville	1	NAME				' ليما	eriuri g o	- Avonion	
NAME CTREET ADDRESS :						ADDOZOG						
STREET ADDRESS						ADDRESS						
CITY-ST-ZIP			DELETE		CITY-S TITLE	I-ZIP	 			Change	Addition	
TITLE			- DECEME							unan y c	- VOORGOLI	
NAME CIRCL ADDOCCO					NAME	ADDOCCO						
STREET ADDRESS	1			0.3	ושמחונ	ADDRESS	ſ					

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliermental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

ATURE AND HOED OR PRINTED NAME OF SIGNING OFFICER OR PRECTOR

///2/97

Daytime Phone # 00008(12

FILED

Jan 23 1997 8:00am

Secretary of State