

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N26831

(0)

1. Corporation Name

NEW DELIVERANCE CENTER, INC.



Principal Place of Business

Mailing Address

3130 N. POWERS DR
6616 HENRICH DRIVE
ORLANDO FL 32818
US

C/O EFETUS C. WRIGHT
6616 HENRICH DR
ORLANDO FL 32818-5339
US

3. Date Incorporated or Qualified
06/07/1988

3a. Date of Last Report
04/28/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-2963193

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☒

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WRIGHTM EFETUS C.
6616 HENRICH DRIVE
ORLANDO FL 32818

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☒ DELETE
NAME VD
STREET ADDRESS MURPHY, FRANK J
CITY-ST-ZIP 2804 WYNDHAM LANE
ORLANDO FL

TITLE ☐ DELETE
NAME VD
STREET ADDRESS FORBES, ERMINE
CITY-ST-ZIP 5106 PIPES O THE GLENN WAY
ORLANDO FL

TITLE ☐ DELETE
NAME PD
STREET ADDRESS WRIGHT, EFETUS C.
CITY-ST-ZIP 6616 HENRICH DR
ORLANDO FL

TITLE ☐ DELETE
NAME TD
STREET ADDRESS WRIGHT, DELKIE
CITY-ST-ZIP 6616 HENRICH DR
ORLANDO FL

TITLE ☒ DELETE
NAME AT
STREET ADDRESS BLACK, HELEN
CITY-ST-ZIP 2540 CITRUS CLUB LANE
ORLANDO FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

PD
WRIGHT, EFETUS C.
6616 HENRICH DR
ORLANDO FL

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

VD
FORBES, ERMINE
3000 S. BUNBY AVE.
ORL FL

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

TD
WRIGHT, DELKIE
6616 HENRICH DR
ORLANDO FL

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

S
MILLCENT CAMPBELL
3105 BYU COURT
ORL FL

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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:

EFETUS C. WRIGHT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

6.3.96

407.290.0936

CR2E037 (12/95)