

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 23, 1999 8:00 am
Secretary of State

04-23-1999 90178 014 ****75.00

DOCUMENT # N26831

1. Corporation Name

NEW DELIVERANCE CENTER, INC.

Principal Place of Business

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

Mailing Address

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



2. Principal Place of Business

21 3130 N POWERS DRIVE

2a. Mailing Address

26 6616 HENRICH DRIVE

3. Date Incorporated or Qualified

06/07/1988

4. FEI Number

59-2963193

Applied For

Not Applicable

5. Certificate of Status Desired

6

\$8.75 Additional
Fee Required

6. Election Campaign Financing

7

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

WRIGHTM EFETUS C.
6616 HENRICH DRIVE
ORLANDO FL 32818

10. Name and Address of New Registered Agent

81 Name

EULALEE

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

TITLE VD ☐ DELETE

NAME FORBES, ERMINE
STREET ADDRESS 3222 S. BUMBAY AVENUE
CITY-ST-ZIP ORLANDO FL

TITLE PD ☐ DELETE

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

TITLE TD ☐ DELETE

NAME WRIGHT, DELKIE
STREET ADDRESS 6616 HENRICH DR
CITY-ST-ZIP ORLANDO FL

TITLE S ☒ DELETE

NAME CAMPBELL, MILICENT
STREET ADDRESS 3105 BYU COURT
CITY-ST-ZIP ORLANDO FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

S. JOHNSON EULALEE
1415 N. MONITOR AVE
ORL FL 32818

14. I 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

SIGNATURE EFETUS C. WRIGHT 4-20-99 407-290-093

CR25037 (11/98)