

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28098

FILED
Mar 09, 2009
Secretary of State

Entity Name: CRY OF DELIVERANCE OUTREACH AND MINISTRY, INC.

Current Principal Place of Business:

4589 LA VISTA DRIVE
ORLANDO, FL 32808

New Principal Place of Business:

Current Mailing Address:

4589 LA VISTA DR.
ORLANDO, FL 32808

New Mailing Address:

FEI Number: 35-2225933

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUTLEDGE, PRIMUS JR
4589 LA VISTA DR.
ORLANDO, FL 32808 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: PD () Delete
Name: RUTLEDGE, PRIMUS JR.
Address: 4589 LA VISTA DRIVE
City-St-Zip: ORLANDO, FL 32808

Title: VPD () Delete
Name: GREEN, DOROTHY
Address: 4589 LAVISTA DRIVE
City-St-Zip: ORLANDO, FL 32808

Title: STD () Delete
Name: BRYANT, MARILYN
Address: 4589 LAVISTA DRIVE
City-St-Zip: ORLANDO, FL 32808

Title: D () Delete
Name: WILLIAMS, WANDA
Address: 3665 CHALET COURT
City-St-Zip: ORLANDO, FL 32818

Title: D () Delete
Name: HOLIDAY, JAMES
Address: 4589 LA VISTA DRIVE
City-St-Zip: ORLANDO, FL 32808

Title: D () Delete
Name: RUTLEDGE, ANNIE L
Address: 5970 NW COUNTY HWY 318
City-St-Zip: REDDICK, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PRIMUS RUTLEDGE JR.

PD

03/09/2009

Electronic Signature of Signing Officer or Director

Date