## 2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE

## Apr 21, 2002 8:00 am Secretary of State DOCUMENT # **N46631** 1. Entity Name 03-06-2002 90114 039 \*\*\*\*70.00 DELIVERANCE HOUSE OF PRAYERS, INC. Principal Place of Business Mailing Address 7150 WILEY RD 7150 WILEY RD 7169 EUDINE DRIVE SOUTH 7169 EUDINE DRIVE SOUTH JACKSONVILLE FL 32210 JACKSONVILLE FL 32210 2. Principal Place of Bysiness 5248--2 Modi 3. Majling Address 4546 Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For 59-3127361 KSONVI Il Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent Name and Address of New Register ROBINSON, DWIGHT DAVID 7150 WILEY RD JACKSONVILLE FL 32210 8. The above name entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE TITLE (9/01) □ Delete ☐ Addition ROBINSON, DWIGHT DAVID NAME NAME 7150 WILEY RD STREET ADORESS STREET ADDRESS CR2E037 CITY-ST-ZIP JACKSONVILLE FL CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition GIST, EARLE NAME NAME 3820 O'RIELLY RD STREET ADDRESS STREET ADDRESS CITY-ST-709 JACKSONVILLE FL 32210 CITY-ST-ZIP DV--- --·DILE: = □ Delete : C. TITLE:-- -Change \_\_\_ Addition ROBINSON, JACKIE NAME NAME STREET ADDRESS 7150 WILEY RD STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32210 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition <del>Mabika.</del> Latari Lawson NAME NAME LAWSON, MALEIKA LATARI 1591 LANE AVE APT 20F STREET ADDRESS STREET ADDRESS CARD NITCUL BURS CITY-ST-ZIP JACKSONVILLE FL 32210 CITY-ST-ZIP Jacksonville FL 32210 TITLE ☐ Delete TITLE ☐ Change Addition SLOCUMB-ARNOLD, DEBORAH NAME NAME 17057 SONORA DR. N STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32244 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 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 report or supplemental 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 10 or Block 11 if

FILED

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## Attetue 20 1/14663 Deliverance House of Prayer, tive.

5248-2 Norwood Avenue Jacksonville, FL 32208

April:7," 2002:

Phone: 904-768-4249

Pastors:
Dwight & Jackie
Robinson

Florida Department Of State Katherine Harris Secretary of State

Secretary: Maleika Lawson

Street Address

Deliverance House of Prayer, Inc. 5248-2 Norwood Avenue
Jacksonville, Fl 32208

Mailing Address
Deliverance House Of Prayer, Inc.
P.O Box 6546
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Deborah S. Arnold