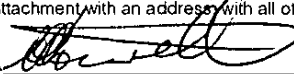


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 03, 2005 8:00 am
Secretary of State

05-03-2005 90074 021 ****70.00

DOCUMENT # N50783 1. Entity Name CHURCH OF JESUS CHRIST, DELIVERANCE TEMPLE INCORPORATED					
Principal Place of Business 1001 14TH AVE S ST. PETERSBURG FL 33712 US			Mailing Address 2543 58TH TERR SOUTH ST PETERSBURG FL 33712 US		
2. Principal Place of Business 1111 18th Ave S.			3. Mailing Address Suite, Apt. #, etc.		
City & State St. Petersburg FL.			City & State		
Zip 33712		Country in o l l a s		Zip	
Country		4. FEI Number 59-3190177		Applied For Not Applicable	
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required				1st MOORE CR2E037 (10/04)	
6. Name and Address of Current Registered Agent POWELL, WINSOME 2543 58TH TERRACE SOUTH ST PETERSBURG FL 33712			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City		
8. 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. I am familiar with, and accept the obligations of registered agent.			SIGNATURE _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)		
FILE NOW: FEE IS \$61.25 Due By May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D POWELL, WINSOME E 2543 58TH TERRACE S ST PETE FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Jasper Brisbon 1010 E. Linebaugh Ave Tampa FL. 33612	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D POWELL, KAREN S 2025 LAKEWOOD CLUB DR S SAINT PETERSBURG FL 33712	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Flossie Brisbon 1010 E. Linebaugh Ave Tampa FL. 33612	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D POWELL, ALECIA 2543 58TH TERR SOUTH ST PETERSBURG FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	O RAMSEY, ANNETTE 1000 66TH ST N #5 SAINT PETERSBURG FL 33710	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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 changed, or on an attachment with an address with all other like empowered.					
SIGNATURE:  Winsome Powell 4/24/05 727-866-0261 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					