

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50783

FILED  
Apr 27, 2009  
Secretary of State

**Entity Name:** CHURCH OF JESUS CHRIST, DELIVERANCE TEMPLE INCORPORATED

**Current Principal Place of Business:**

1111 18 AVE S  
ST. PETERSBURG, FL 33712 US

**New Principal Place of Business:**

**Current Mailing Address:**

2543 58TH TERR SOUTH  
ST PETERSBURG, FL 33712 US

**New Mailing Address:**

**FEI Number:** 59-3190177

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

POWELL, WINSOME  
2543 58TH TERRACE SOUTH  
ST PETERSBURG, FL 33712 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: D ( ) Delete  
Name: POWELL, WINSOME E  
Address: 2543 58TH TERRACE S  
City-St-Zip: ST PETE, FL

Title: D ( ) Delete  
Name: POWELL, KAREN S  
Address: 2025 LAKEWOOD CLUB DR S  
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: D ( ) Delete  
Name: POWELL, ALECIA  
Address: 2543 58TH TERR SOUTH  
City-St-Zip: ST PETERSBURG, FL

Title: D ( ) Delete  
Name: BRISBON, JASPER  
Address: 1010 E LINEBAUGH AVE  
City-St-Zip: TAMPA, FL 33612

Title: D ( ) Delete  
Name: BRISBON, FLOSSIE  
Address: 1010 E LINEBAUGH AVE  
City-St-Zip: TAMPA, FL 33612

**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:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: WINSOME POWELL

PAST

04/27/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date