

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50847

FILED  
May 01, 2008  
Secretary of State

**Entity Name:** DELIVERANCE CHURCH OF THE NAZARENE, INC.

**Current Principal Place of Business:**

749 NE 79 STREET  
MIAMI, FL 33138

**New Principal Place of Business:**

**Current Mailing Address:**

7610 BISCAYNE BLVD  
MIAMI, FL 33138

**New Mailing Address:**

**FEI Number:** 65-0536133      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

SEJOUR, JOEL REV  
749 NE 79 STREET  
MIAMI, FL 33138 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: SEJOUR, JOEL  
Address: 749 NE 79 STREET  
City-St-Zip: MIAMI, FL 33138

Title: D ( ) Delete  
Name: SEJOUR, ODINE  
Address: 749 NE 79 STREET  
City-St-Zip: MIAMI, FL 33138

Title: D ( ) Delete  
Name: ADEMAS, AUGUSTE  
Address: 285 NW 143 STREET  
City-St-Zip: MIAMI, FL 33168

Title: D ( ) Delete  
Name: BAPATISTE, ELIEUNE  
Address: 830 NW 192 STREET  
City-St-Zip: MIAMI, FL 33169

**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:

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: JOEL SEJOUR

D

05/01/2008

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

\_\_\_\_\_  
Date