


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2007 08:00 AM
Secretary of State

DOCUMENT # N51373	
1. Entity Name UNITED DELIVERANCE CHRISTIAN CENTER, INC.	

Principal Place of Business 428 JERNIGAN AVENUE ORLANDO, FL 32805	Mailing Address 428 JERNIGAN AVENUE ORLANDO, FL 32805
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DO NOT WRITE IN THIS SPACE



04182007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-3128436	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent LOWERY, JAMES 428 JERNIGAN AVENUE ORLANDO, FL 32805	DO NOT WRITE IN THIS SPACE
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LOWERY, JAMES 1710 GUINYARD STREET ORLANDO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LOWERY, EVELYN 1710 GUINYARD STREET ORLANDO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	O JEFFERSON, VIRGINIA 10404 WESTLEY WAY ORLANDO, FL 32825
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ALEXANDER, CEASER 3037 GRANDOLA DRIVE ORLANDO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ALEXANDER, MARY 3037 GRANDOLA DRIVE ORLANDO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	O WATTS, LAURA 2501 KINGSLAND AVE ORLANDO, FL 32808

DO NOT WRITE
IN THIS SPACE

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05/08/07-80102-017 70.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *James Lowery* **4/25/07 407425-0871**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR