2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51373

FILED Feb 29, 2008 Secretary of State

Entity Name: UNITED DELIVERANCE CHRISTIAN CENTER, INC.

Current Principal Place of Business: New Principal Place of Business: 428 JERNIGAN AVENUE ORLANDO, FL 32805 **Current Mailing Address: New Mailing Address:** 428 JERNIGAN AVENUE ORLANDO, FL 32805 FEI Number: 59-3128436 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LOWERY, JAMES 428 JERNIGAN AVENUE ORLANDO, FL 32805 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition LOWERY, JAMES, LOWERY, JAMES, Name: Name: 1710 GUINYARD STREET Address: 1710 GUINYARD STREET Address: City-St-Zip: ORLANDO, FL City-St-Zip: ORLANDO, FL 32805 Title: VD () Delete Title: (X) Change () Addition LOWERY, EVELYN, Name: LOWERY, EVELYN, Name: Address: 1710 GUINYARD STREET Address: 1710 GUINYARD STREET City-St-Zip: ORLANDO, FL City-St-Zip: ORLANDO, FL 32805 Title: () Delete Title: () Change () Addition JEFFERSON, VIRGINIA Name: Name: 10404 WESTLEY WAY Address: Address: City-St-Zip: ORLANDO, FL 32825 City-St-Zip: () Delete Title: TD Title: TD (X) Change () Addition Name: ALEXANDER, CEASER Name: ALEXANDER, CEASER 3037 GRANDOLA DRIVE 3037 GRANDOLA DRIVE Address: Address: ORLANDO, FL City-St-Zip: City-St-Zip: ORLANDO, FL 32811 Title: () Delete Title: (X) Change () Addition ALEXANDER, MARY ALEXANDER, MARY Name: Name: 3037 GRANDOLA DRIVE 3037 GRANDOLA DRIVE Address: Address: City-St-Zip: ORLANDO, FL City-St-Zip: ORLANDO, FL 32811 Title: () Delete Title: () Change () Addition WATTS, LAURA Name: Name: Address: 2501 KINGSLAND AVE Address: ORLANDO, FL 32808 City-St-Zip: 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: JAMES LOWERY PD 02/29/2008