

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000419

FILED  
Jun 07, 2006  
Secretary of State

Entity Name: THE NEW COVENANT DELIVERANCE OUTREACH, INC.

**Current Principal Place of Business:**

1700 NW 8TH ST  
FORT LAUDERDALE, FL 33311

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1779  
LAUDERDALE LAKES, FL 33302

**New Mailing Address:**

PO BOX 1779  
FT. LAUDERDALE, FL 33302

FEI Number: 65-0315515      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:**

ORR, LIVINGSTON PASTOR  
2891 NW 14TH ST  
FORT LAUDERDALE, FL 33311      US

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

ORR, LIVINGSTON PASTOR  
1501 NW 24TH AVE  
FORT LAUDERDALE, FL 33311      US

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

06/07/2006

Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: ORR, LIVINGSTON  
Address: 2891 NW 14TH ST  
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: AP      ( ) Delete  
Name: ORR, SAMUEL  
Address: 3490 NW 28TH COURT  
City-St-Zip: LAUDERDALE LAKES, FL 33311

Title: M      ( ) Delete  
Name: ALBERTINE, PORTER  
Address: 480 NW 24TH AVE. APT.21  
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: SD      ( ) Delete  
Name: ORR, NAKASIE  
Address: 1501 NW 24TH AVE.  
City-St-Zip: LAUDERDALE LAKES, FL 33311

Title: T      ( ) Delete  
Name: ROSE, RIED  
Address: 5933 NW 23RD ST  
City-St-Zip: LAUDERHILL, FL 33313

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD      (X) Change ( ) Addition  
Name: ORR, LIVINGSTON  
Address: 1501 NW 24TH AVE  
City-St-Zip: FT. LAUDERDALE, FL 33311

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: M      (X) Change ( ) Addition  
Name: ALBERTINE, PORTER  
Address: P. O. BOX 61154  
City-St-Zip: PALM BAY, FL 32906

Title: SD      (X) Change ( ) Addition  
Name: ORR, NAKASIE  
Address: P.O BOX 1779  
City-St-Zip: FT. LAUDERDALE, FL 33302

Title: T      (X) Change ( ) Addition  
Name: MOORE, SHEIENE  
Address: 1501 NW 24TH AVE  
City-St-Zip: FT. LAUDERDALE, FL 33311

I hereby certify that the information supplied with this filing does not qualify for the 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: LIVINGSTON ORR

Electronic Signature of Signing Officer or Director

PD

06/07/2006

Date