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CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE

DOCUMENT # N94000000531 (3)

GREAT REUNION DELIVERANCE HOLINESS CHURCH, INC.

FILED
1995 MAR 27 PM 12:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business
815 N.W. 119TH STREET
MIAMI FL

Mailing Address
815 N.W. 119TH STREET
MIAMI FL

3. Date Incorporated or Qualified: 02/03/1994
3a. Date of Last Report:

4. FEI Number: 65-0537578
Applied For
Not Applicable

2. Principal Place of Business
21
Suite, Apt. # or Bldg.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. # or Bldg.
27
City & State
28
Zip 29 Country 30

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required

8. Has corporation has liability for intangible tax under S. 199.032 Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

HUDSON, NORMA J. E
14520 N.E. 4TH AVENUE
MIAMI FL

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE
(If Not Applicable Type Or Print Name Of Person With Authority To Sign On Behalf Of Corporation) (If Registered Agent Is An Individual Sign Above) DATE

12. OFFICERS AND DIRECTORS	13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 1994	
TITLE PD NAME STINSON, V. E STREET ADDRESS ~~3120 NW 131ST STREET~~ CITY ST ZIP OPA-LOCKA FL 33054	TITLE PD NAME STINSON, V.E. STREET ADDRESS 1140 N.W. 127 St. CITY ST ZIP MIAMI, FL 33168	X Change ☐ Addition
TITLE V NAME DUPREE, CLARETHA STREET ADDRESS 20601 N.W. 24TH COURT CITY ST ZIP MIAMI FL 33056	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE S NAME GLOVER, ROSALIND STREET ADDRESS 20601 N.W. 24TH COURT CITY ST ZIP MIAMI FL 33056	TITLE D NAME HENRY, JIMMY STREET ADDRESS 758N.W.108th STREET CITY ST ZIP MIAMI, FL33168	☐ Change ☐ Addition
TITLE T NAME BAKER, ANNIE STREET ADDRESS 18932 N.W. 10TH PLACE CITY ST ZIP MIAMI FL 33169	TITLE D NAME BRERETON, BOBBY STREET ADDRESS 1065N.W.114thSTREET CITY ST ZIP MIAMI, FL33168	☐ Change ☐ Addition
TITLE D NAME WHITTAKER, GERALDINE STREET ADDRESS 13580N.W.4thPLACE CITY ST ZIP MIAMI, FL 33168	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this report, including any changes, is true and complete to the information filed in Section 607.0505, Florida Statutes. Further, I certify that the information contained in the annual report or supplemental annual report is true and complete and that my signature shall have the same legal effect and be made under oath that I am a officer or director of the corporation or the person authorized to execute the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12, or Block 13 with the word "change" or "addition" adjacent to it.

SIGNATURE: Pastor V.E. Stinson / Pastor V.E. Stinson — March 27, 1995 — 305-624-5394
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — TELEPHONE

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