

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001939

FILED  
Apr 20, 2011  
Secretary of State

**Entity Name:** LIFE DELIVERANCE MINISTRIES CORPORATION

**Current Principal Place of Business:**

3377 JIM LEE ROAD  
TALLAHASSEE, FL 32301 US

**New Principal Place of Business:**

**Current Mailing Address:**

13480 MIDDLEFIELD ROAD  
TALLAHASSEE, FL 32309 US

**New Mailing Address:**

FEI Number: 59-3236193

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WATKINS, LORENZO III  
13480 MIDDLEFIELD RD  
TALLAHASSEE, FL 32309 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: P  
Name: WATKINS, LORENZO  
Address: 13480 MIDDLEFIELD ROAD  
City-St-Zip: TALLAHASSEE, FL 32309

Title: D  
Name: ANGUS, BRENTON  
Address: 2377 FOSTER COURT  
City-St-Zip: TALLAHASSEE, FL 32303

Title: D  
Name: CHILDRESS, JOE  
Address: 3377 JIM LEE ROAD  
City-St-Zip: TALLAHASSEE, FL 32301

Title: D  
Name: HALL, DARRYL  
Address: 10560 VALENTINE ROAD SOUTH  
City-St-Zip: TALLAHASSEE, FL 32311

Title: S  
Name: FRAZIER, KENYATA  
Address: 246 AYERS COURT  
City-St-Zip: TALLAHASSEE, FL 32305

Title: T  
Name: CRUMP, LEJUNE  
Address: 1479 GREY FOX RUN  
City-St-Zip: TALLAHASSEE, FL 32311

I hereby 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 all other like empowered.

SIGNATURE: LORENZO WATKINS

P

04/20/2011

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

\_\_\_\_\_  
Date