

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002609

FILED
Apr 16, 2009
Secretary of State

Entity Name: COMMUNITY OUTREACH WORD OF DELIVERANCE MINISTRIES INC.

Current Principal Place of Business:

650 27TH ST E
BRADENTON, FL 34208

New Principal Place of Business:

Current Mailing Address:

502 5TH AVE. DR. E.
BRADENTON, FL 34208

New Mailing Address:

FEI Number: 22-3865174

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCDONALD, DEXTER N
758 GATES CREEK ROAD
BRADENTON, FL 34202 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 () Delete
Name: MCDONALD, DEXTER N
Address: 758 GATES CREEK ROAD
City-St-Zip: BRADENTON, FL 34202

Title: T () Delete
Name: WITTER, CONLEY
Address: 4912 26TH AVE. E.
City-St-Zip: BRADENTON, FL 34202

Title: S () Delete
Name: MC DONALD, HERMA W
Address: 758 GATES CREEK RD
City-St-Zip: BRADENTON, FL 34212

Title: D () Delete
Name: HAGGINS, ARTHUR
Address: 1011 27 ST CT E
City-St-Zip: BRADENTON, FL 34205

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D (X) Change () Addition
Name: HUGGINS, ARTHUR
Address: 1011 27 ST CT E
City-St-Zip: BRADENTON, FL 34205

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: DEXTER MCDONALD

P, D

04/16/2009

Electronic Signature of Signing Officer or Director

Date