

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003737

FILED
Feb 13, 2009
Secretary of State

Entity Name: CHRIST DELIVERANCE INTERNATIONAL, INC.

Current Principal Place of Business:

1550 NW 36 ST
MIAMI, FL 33142 US

New Principal Place of Business:

7943 NW 14TH CT
MIAMI, FL 33147 US

Current Mailing Address:

7943 NW 14TH CT
MIAMI, FL 33147 US

New Mailing Address:

FEI Number: 65-0513865 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BROWN, PAMELA
1286 NW 53RD ST
MIAMI, FL 33142 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: BROWN, PAMELA
Address: 7943 NW 14TH CT
City-St-Zip: MIAMI, FL

Title: VD () Delete
Name: BROWN, RICHARD K
Address: 7943 NW 14TH CT
City-St-Zip: MIAMI, FL

Title: D (X) Delete
Name: RHODES, SHERRIA
Address: 1286 NW 53 STREET
City-St-Zip: MIAMI, FL 33142

Title: TSD () Delete
Name: JACKSON, PATRICIA
Address: 4410 NW 169 TERR.
City-St-Zip: MIAMI, FL 33142

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BROWN, PAMELA
Address: 7943 NW 14TH CT
City-St-Zip: MIAMI, FL 33147

Title: VD (X) Change () Addition
Name: BROWN, RICHARD K
Address: 7943 NW 14TH CT
City-St-Zip: MIAMI, FL 33147

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

Title: TSD (X) Change () Addition
Name: JACKSON, PATRICIA
Address: 8852 NW 22ND PLACE
City-St-Zip: MIAMI, FL 33147

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: PAMELA P. BROWN

PD

02/13/2009

Electronic Signature of Signing Officer or Director

Date