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Feb 03 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N94000004173 (0)

1. Corporation Name

CHRIST DELIVERANCE CHURCH OF GOD MINISTRIES, INC

Principal Place of Business

3055 NW 76TH ST
MIAMI FL 33147

Mailing Address

2959 NW 156TH ST
MIAMI FL 33054-22253. Date Incorporated or Qualified
08/25/19943a. Date of Last Report
01/26/19964. FEI Number
65-0520033Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

ROBERTS, AARON H SR
2959 NW 156TH ST
MIAMI FL 33054

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME ROBERTS, AARON H SR
STREET ADDRESS 2959 NW 156TH ST
CITY-ST-ZIP MIAMI FL 33054-2225TITLE DS ☐ DELETE
NAME HALL, MARY P
STREET ADDRESS 2440 NW 168TH ST
CITY-ST-ZIP MIAMI FL 33056TITLE DT ☐ DELETE
NAME ROBERTS, ALICE M
STREET ADDRESS 2959 NW 156TH ST
CITY-ST-ZIP MIAMI FL 33054-2225TITLE TAT ☐ DELETE
NAME THORNTON, ANNIE M
STREET ADDRESS 1350 NW 59TH ST.
CITY-ST-ZIP MIAMI FL 33142TITLE DT ☐ DELETE
NAME JONES, CURTIS J
STREET ADDRESS 775 NW 178TH TERR
CITY-ST-ZIP MIAMI FLTITLE T ☐ DELETE
NAME ROBERTS, LULA M
STREET ADDRESS 6840 N W 12TH AVE
CITY-ST-ZIP MIAMI FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Curtis J. Jones* REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/7/97

(305) 836-7815

CR2E037 (9/96)