

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Apr 06, 2009  
Secretary of State

DOCUMENT# N94000005599

Entity Name: HOUSE OF PRAYER OF DELIVERANCE CENTER, INC.

**Current Principal Place of Business:**

C/O ALICE WEATHERSPOON  
3331 NW 36 AVENUE  
FORT LAUDERDALE, FL 33309 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ALICE WEATHERSPOON  
3331 NW 36 AVENUE  
FORT LAUDERDALE, FL 33309 US

**New Mailing Address:**

FEI Number: 65-0534188      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

WEATHERSPOON, ALICE  
3331 NW 36TH AVENUE  
FT. LAUDERDALE, FL 33309 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: T ( ) Delete  
Name: RANDALL, DARLENE  
Address: 3331 NW 36 AVE  
City-St-Zip: LAUDERDALE LAKES, FL 33309

Title: S ( ) Delete  
Name: PENDERGRAPH, TRIFINIA K  
Address: 3768 N.W 42 ST.  
City-St-Zip: LAUDERDALE LAKE, FL 33309

Title: TD ( ) Delete  
Name: CHANDLER, SHIRLEY  
Address: 3331 N.W 36 AVE  
City-St-Zip: LAUDERDALE LAKES, FL 33309

Title: VPDT ( ) Delete  
Name: CHANDLER, SHIRLEY  
Address: 3331 N.W 36 AVE  
City-St-Zip: LAUDERDALE LAKES, FL 33309

Title: PP ( ) Delete  
Name: WEATHERSPOON, ALICE  
Address: 3331 NW 36TH AVE.  
City-St-Zip: FORT LAUDERDALE, FL 33309

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

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

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: SHIRLEY CHANDLER

VP

04/06/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date