

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000243

FILED
Feb 19, 2009
Secretary of State

Entity Name: FAITH & DELIVERANCE MINISTRY INC.

Current Principal Place of Business:

2024 SOUTH US I
VERO BEACH, FL 32962 US

New Principal Place of Business:

Current Mailing Address:

2024 SOUTH US I
VERO BEACH, FL 32962 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

FLOYD, THERESA
2024 SOUTH US I
VERO BEACH, FL 32962 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: DD () Delete
Name: FLOYD, THERESA
Address: 4735 43RD AVENUE
City-St-Zip: VERO BEACH, FL 32967

Title: D () Delete
Name: FLOYD, THEODORE S
Address: 1935 MILLER STREET
City-St-Zip: ORANGE PARK, FL

Title: D () Delete
Name: TIFFANY, EARLY F J
Address: 4725 38TH CIRCLE APT 102
City-St-Zip: VERO BEACH, FL 32967

Title: D () Delete
Name: FLOYD, JUSTIN
Address: 1935 MILLER STREET
City-St-Zip: ORANGE PARK, FL 32073

Title: D () Delete
Name: FLOYD, THEODORE JR.
Address: 4735 43RD AVENUE
City-St-Zip: VERO BEACH, FL 32967

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: THERESA FLOYD

DR.

02/19/2009

Electronic Signature of Signing Officer or Director

Date