## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N95000001719

Entity Name: WORD OF DELIVERANCE, INC.

FILED Mar 28, 2009 Secretary of State

1304 WATER WILLOW DR., APT. # A 1603 BRENDON LAKE DRIVE DELAND, FL 32720

# 207

ORANGE CITY, FL 32763 US

**Current Mailing Address: New Mailing Address:** 

1304 WATER WILLOW DR., APT. # A 1603 BRENDON LAKE DRIVE

DELAND, FL 32720 # 207

ORANGE CITY, FL 32763 US

FEI Number: 59-3320462 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BROWN, HELEN

BROWN, HELEN 1304 WATER WILLOW DR., APT. # A 1603 BRENDON LAKE DRIVE DELAND,, FL 32720 # 207

ORANGE CITY, FL 32763 US

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: 03/28/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

( ) Delete (X) Change ( ) Addition

BROWN, HELEN BROWN, HELEN Name: Name:

Address: 1304 WATER WILLOW DR., APT. # A Address: 1603 BRENDON LAKE DRIVE City-St-Zip: DELAND, FL 32720 US City-St-Zip: ORANGE CITY, FL 32763 US

Title: () Delete Title: () Change () Addition BROWN, KENNETH L Name: Name:

Address: 3166 RILEY RIDGE ROAD Address: City-St-Zip: HOLLAND, MI 49424 US City-St-Zip:

Title: () Delete Title: () Change () Addition

HALL, DOROTHY M Name: Name: 105 ALLIANCE STREET, APT. B Address: Address: City-St-Zip: HAVRE DE GRACE, MD 21078 US 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: HELEN BROWN D 03/28/2009