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Jan 31 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000002019 (6)

1. Corporation Name

NAZARETH HOLINESS CHURCH OF DELIVERANCE, INCORPORATED



Principal Place of Business

Mailing Address

19115 N.W. 12TH COURT
MIAMI FL 33169

19115 N.W. 12TH COURT
MIAMI FL 33169-3402

2. Principal Place of Business

2a. Mailing Address

21 18184 N.W. 2 AVE

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

City & State

27 City & State

23 MIAMI FL

28

Zip

Country

Zip

Country

24 33169

25

Dade

29

30

3. Date Incorporated or Qualified
04/26/1995

3a. Date of Last Report
02/22/1996

4. FEI Number
65-0592159

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CAMPBELL, EUSTACE
19115 N.W. 12TH COURT
MIAMI FL 33169

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PCD ☐ DELETE
NAME CAMPBELL, EUSTICE
STREET ADDRESS 19115 N.W. 12TH COURT
CITY-ST-ZIP MIAMI FL 33169

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE VPD ☐ DELETE
NAME CAMPBELL, ADELLA
STREET ADDRESS 19115 N.W. 12TH COURT
CITY-ST-ZIP MIAMI FL 33169

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE SD ☐ DELETE
NAME MONTGOMERY, SONIA
STREET ADDRESS 17510 N.W. 9TH PLACE
CITY-ST-ZIP MIAMI FL 33169

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE TD ☐ DELETE
NAME ROACHE, PATRINA
STREET ADDRESS 1325 N.W. 125TH ST.
CITY-ST-ZIP MIAMI FL 33167

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME LLOYD, ELLIS
STREET ADDRESS 2950 SW 11TH ST
CITY-ST-ZIP FT LAUDERDALE FL 33312

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME RUPERCIA, LAWRENCE
STREET ADDRESS 1848 NW 84TH ST.
CITY-ST-ZIP MIAMI FL 33147

6.1 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: EUSTACE CAMPBELL 01/15/1997 305.652.9325
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0032342

CR2E037 (9/96)