

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 29, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # N95000002561**

1. Entity Name

**TRINITY PENTECOSTAL DELIVERANCE CHURCH OF  
GOD, INC.**



Principal Place of Business

**3788 SW 40TH ST  
HOLLYWOOD FL 33023**

Mailing Address

**3788 SW 40TH ST  
HOLLYWOOD FL 33023**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

**11-2653554**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MONROE, ALICE  
3788 SW 40TH STREET  
HOLLYWOOD FL 33023**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. (I am familiar with, and accept the obligations of registered agent).

SIGNATURE

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

(NOTE: Registered Agent signature required when re-registering)

DATE

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete  
NAME **DAVIS, SANDY**  
STREET ADDRESS **3405 SW 64TH AVENUE**  
CITY-ST-ZIP **MIRAMAR FL 33023**

TITLE ☐ Change ☐ Add  
NAME **U00000483239**  
STREET ADDRESS **04/11/06-80111-004 61.25**  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME **NEWLAND, RUPERT**  
STREET ADDRESS **3788 SOUTH WEST 40TH STREET**  
CITY-ST-ZIP **HOLLYWOOD FL 33023**

TITLE ☐ Change ☐ Add  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME **WALLACE, JANICHTH**  
STREET ADDRESS **3789 SOUTH WEST 40TH STREET**  
CITY-ST-ZIP **HOLLYWOOD FL 33023**

TITLE ☐ Change ☐ Add  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME **TOMLINSON, MA-JONIE**  
STREET ADDRESS **981 NW 181ST STREET**  
CITY-ST-ZIP **MIAMI FL 33169**

TITLE ☐ Change ☐ Add  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME **RITA COKE**  
STREET ADDRESS **6032 BUCHANAN ST**  
CITY-ST-ZIP **HOLLYWOOD FL**

TITLE ☐ Change ☐ Add  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Add  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11, if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Rev. Alice Monroe*

*3-23-2006*