

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001433

FILED
Apr 10, 2007
Secretary of State

Entity Name: LIGHTHOUSE OF DELIVERANCE MINISTRIES, INC.

Current Principal Place of Business:

743 CENTRAL AVE. S.
APOPKA, FL 32703 US

New Principal Place of Business:

743 S. CENTRAL AVE.
APOPKA, FL 32703 US

Current Mailing Address:

P.O. BOX 459
APOPKA, FL 32704

New Mailing Address:

743 S. CENTRAL AVE.
APOPKA, FL 32703

FEI Number: 16-1673947

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEATHERS, NATHANIEL JR
743 SOUTH CENTRAL AVENUE
APOPKA, FL 32703 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: ED () Delete
Name: WEATHERS, NATHANIEL JR
Address: 1433 FALCONWOOD CT.
City-St-Zip: APOPKA, FL 32712

Title: D () Delete
Name: WEATHERS, PATRICIA
Address: 1433 FALCONWOOD CT.
City-St-Zip: APOPKA, FL 32712

Title: AD () Delete
Name: WHITE, ROMAN
Address: 1341 FOXFOREST CIR.
City-St-Zip: APOPKA, FL 32712

Title: T () Delete
Name: CURRY, MICHAEL
Address: 15 PINE FOREST PLACE
City-St-Zip: APOPKA, FL 32703

Title: AT () Delete
Name: WOOTEN, MANNIE E
Address: 1178 DEER LAKE CIR.
City-St-Zip: APOPKA, FL 33712

Title: S () Delete
Name: WHITE, NELLENA
Address: 1341 FOXFOREST CIR.
City-St-Zip: APOPKA, FL 32703

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
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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 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: NELLENA WHITE

S

04/10/2007

Electronic Signature of Signing Officer or Director

Date