2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2009
Secretary of State

DOCUMENT# N96000002260

Entity Name: SAINTS IN CHRIST DELIVERANCE TEMPLE, INC. INTERNATIONAL

Current Principal Place of Business:

2057 SW MAIN BLVD
SUITE 3
LAKE CITY, FL 32055

New Principal Place of Business:

283 NW JEFFERSON ST
LAKE CITY, FL 32055

Current Mailing Address:

805 NW. OAKLAWN TERR.
LAKE CITY, FL 32055

New Mailing Address:

FEI Number: 59-3389885 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DIXON, LEONARD
805 OAKLAWN TERR.
LAKE CITY, FL 32055 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: SD ( ) Delete
Name: LEE, ROSEMARY
Address: 677 NW ALMA TERR.
City-St-Zip: LAKE CITY, FL 32055

Title: PD ( ) Delete
Name: DIXON, LEONARD
Address: 805 NW OAKLAWN TERR.
City-St-Zip: LAKE CITY, FL 32055

Title: VD ( ) Delete
Name: DIXON, ELAINE
Address: 805 NW OAKLAWN TERR
City-St-Zip: LAKE CITY, FL 32055

Title: D ( ) Delete
Name: DIXON, JOHNNIE
Address: 325 NW WRIGHT LANE
City-St-Zip: LAKE CITY, FL 32055

Title: VD ( ) Delete
Name: DIXON, ELAINE
Address: 805 NW OAKLAWN TERR
City-St-Zip: LAKE CITY, FL 32055

Title: D ( ) Delete
Name: DIXON, JOHNNIE
Address: 325 NW WRIGHT LANE
City-St-Zip: LAKE CITY, FL 32055

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:

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: LEONARD DIXON PAST 04/16/2009
Electronic Signature of Signing Officer or Director — Date