2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 10, 2009
Secretary of State

DOCUMENT# N96000002999

Entity Name: RESTORATION & DELIVERANCE OF JESUS CHRIST, INC.

Current Principal Place of Business:

606 10TH AVE W.
PALMETTO, FL 34221

New Principal Place of Business:

3016 1ST STREET WEST
BRADENTON, FL 34210

Current Mailing Address:

P.O. BOX 1558
PALMETTO, FL 34220

New Mailing Address:

FEI Number: 65-0674514 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HARVEY, JACQUELYN
8651 BUNKER HILL RD
DUETTE, FL 33834 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: PD ( ) Delete
Name: HARVEY, JACQUELYN D
Address: 8651 BUNKERHILL RD
City-St-Zip: DUETTE, FL 33834

Title: SD ( ) Delete
Name: BENSON, TRISTA
Address: 4550 47TH ST. WEST
City-St-Zip: BRADENTON, FL 34210

Title: TD ( ) Delete
Name: REAVES, WANDA E
Address: 2706 5TH AVENUE EAST
City-St-Zip: PALMETTO, FL 34221

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change ( ) Addition
Name: BENSON, TRISTA
Address: 4550 47TH ST. WEST #1815
City-St-Zip: BRADENTON, FL 34210

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: TRISTA BENSON SD 07/10/2009
Electronic Signature of Signing Officer or Director — Date