

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

FILED
Feb 22, 2006 8:00 am
Secretary of State

02-22-2006 90006 008 ****70.00

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1. Entity Name

**INTERNATIONAL WORSHIP DELIVERANCE MINISTRY,
INC.**



Principal Place of Business

**1401 BELL AVENUE
SANFORD FL 32771**

Mailing Address

**1401 BELL AVENUE
SANFORD FL 32771**

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
59-3356020

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

**THOMAS, WILLIE P
1401 BELL AVE
SANFORD FL 32771**

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

Willie Pearl Thomas

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

(NOTE: Registered Agent signature required when reinstating)

2-7-06

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

TITLE PD ☐ Delete
NAME THOMAS, WILLIE P
STREET ADDRESS 1401 BELL AVENUE
CITY-ST-ZIP SANFORD FL 32771

TITLE VD ☐ Delete
NAME WATSON, MILDRED W
STREET ADDRESS 4277 GALLIMORE STREET
CITY-ST-ZIP ORLANDO FL 32811

TITLE S ☐ Delete
NAME MATTHEWS, ALICESTINE
STREET ADDRESS 1100 W 16 ST
CITY-ST-ZIP SANFORD FL

TITLE AS ☐ Delete
NAME THOMPSON, YEALISHEA
STREET ADDRESS 200 YALE AVE
CITY-ST-ZIP SANFORD FL 32771

TITLE T ☐ Delete
NAME GAINES, JOYCE
STREET ADDRESS 11021 PECAN AVE.
CITY-ST-ZIP SANFORD FL 32771

TITLE D ☒ Delete
NAME THOMAS, CHARLES
STREET ADDRESS 1100 PECAN AVE
CITY-ST-ZIP SANFORD FL 32771

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Director ☐ Change ☒ Addition
NAME Hazel Posley
STREET ADDRESS 2600 Georgia Ave., #1006
CITY-ST-ZIP Sanford, FL 32773

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

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

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

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

TITLE ☐ Change ☐ Addition
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:

Willie Pearl Thomas

2/7/06