

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 23, 2004 08:00 AM
Secretary of State

DOCUMENT # N97000000653

1. Entity Name
GREATER DELIVERANCE CHURCH INC.



Principal Place of Business
2515 E. BUS HWY. 98
PANAMA CITY, FL 32401

Mailing Address
7570 KELSEY DR.
PANAMA CITY, FL 32404



04222004 No Chg-NP

CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3240113

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MCCLARY, SHERLENE
7570 KELSEY DRIVE
PANAMA CITY, FL 32404

**DO NOT WRITE
IN THIS SPACE**

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, the registered agent.

SIGNATURE *Sherlene Mcclary*
Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

April 22-04
DATE

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

000000126307
04/23/04-80028-020 61.25

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PDP
MCCLARY, SHERLENE
7570 KELSEY DRIVE
PANAMA CITY, FL 32404

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
FT
JACKSON, CARL
1007 BAY AVENUE
PANAMA CITY, FL 32401

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
BAKER, LINDA
1711 W. 15TH ST.
PANAMA CITY, FL 32401

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
JONES, NATHANIEL
903 GREENTREE ROAD
PANAMA CITY, FL 32401

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
MCCLARY, JAMES L
7570 KELSEY DR.
PANAMA CITY, FL 32404

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 *Sherlene Mcclary* *April 22 04* *(850) 784-3624*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #