

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N97000000653

FILED
Sep 25, 2005
Secretary of State

Entity Name: GREATER DELIVERANCE CHURCH INC.

Current Principal Place of Business:

2515 E. BUS HWY. 98
PANAMA CITY, FL 32401

New Principal Place of Business:

Current Mailing Address:

7570 KELSEY DR.
PANAMA CITY, FL 32404

New Mailing Address:

2515 E. BUSINESS HWY 98
PANAMA CITY, FL 32401

FEI Number: 59-3240113 **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:

MCCLARY, SHERLENE
7570 KELSEY DRIVE
PANAMA CITY, FL 32404 US

Name and Address of New Registered Agent:

MCCLARY, SHERLENE
1307 INVERNESS ROAD
LYNN HAVEN, FL 32444 US

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: SHERLENE MCCLARY

09/25/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PDP () Delete
Name: MCCLARY, SHERLENE
Address: 7570 KELSEY DRIVE
City-St-Zip: PANAMA CITY, FL 32404

Title: FT () Delete
Name: JACKSON, CARL
Address: 1007 BAY AVENUE
City-St-Zip: PANAMA CITY, FL 32401

Title: SD () Delete
Name: BAKER, LINDA
Address: 1711 W. 15TH ST.
City-St-Zip: PANAMA CITY, FL 32401

Title: T () Delete
Name: JONES, NATHANIEL
Address: 903 GREENTREE ROAD
City-St-Zip: PANAMA CITY, FL 32401

Title: T () Delete
Name: MCCLARY, JAMES L
Address: 7570 KELSEY DR.
City-St-Zip: PANAMA CITY, FL 32404

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDP (X) Change () Addition
Name: MCCLARY, SHERLENE
Address: 1307 INVERNESS ROAD
City-St-Zip: LYNN HAVEN, FL 32444

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: T (X) Change () Addition
Name: MCCLARY, JAMES L
Address: 1307 INVERNESS ROAD
City-St-Zip: LYNN HAVEN, FL 32444

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SHERLENE MCCLARY

PDP

09/25/2005

Electronic Signature of Signing Officer or Director

Date