1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90160 014 ****70.00

DOCUMENT # N9700001516

1. Corporation Name

REACH OUT DELIVERANCE MINISTRIES INC.

Principal Place of Business

Mailing Address

3108 HAMMERSMITH ROAD ORLANDO FL 32818

3108 HAMMERSMITH ROAD ORLANDO FL: 32818

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2. Principal P	Place of Business	3. Date incorporated or Qualifed							
21 RAACH	n DUH () ! Liverance Mai.	FX 3108 HAM	Mers	munt	03/13/1997				
Suite Ant # etc Stite Ant # etc				,	4. FEI Number			olied For	
227776	2-2 SILVED STARR	27	•		36-4149370		Not	Applicable	
City & State City & State				ride	5. Certifcate of Sta	atus Desired	\$8.75 A Fee Rec		
Zip 24 クハ C	Country 25 LIKANOF	Zip	Countr	ar Court	6. Election Campa		\$5.00 Added to	•	
-308	Name and Address of Current		771.78	115 0 1.	10. Name and Add	ress of New Registere	d Agent		
	Maine distribution of Carrotte		81	1 Name					
IN MET OR	NEAD A				(0.0.0.1)	in Net Annadable)			
HUNT, BRENDA				82 Street Address (P.O. Box Number is Not Acceptable)					
3108 HAMMERSMITH ROAD				3					
ORLANDO FL 32818									
			84	4 City			85 Zip C	ode	
-		10474500 51 114 044			tion submits this str			registered	
office or r	to the provisions of Sections 617.0502 registered agent, or both, in the State of	Florida. Such change was auf	norizea by	y tne corporati	ion's board of directors.	I hereby accept the app	pointment as reg	istered	
agent. I a	am familiar with, and accept the obligation	ns of, Section 617.0503, Florid	da Statute	s.	•				
SIGNATURE									
	Signature, typed or printed name of registered agent a			ent signature require	ed when reinstating)	DATE	AND DIDECTO	DC IN 42	
12.	OFFICERS AND	THE PERSON NAMED IN COLUMN 1	13.		ADDITIONS/CH/	ANGES TO OFFICERS			
TITLE	D	DELETE	1.1 TITLE				Change	Addition	
NAME	HUNT, BRENDA		1.2 NAME				•		
STREET ADDRESS	3108 HAMMERSMITH ROAD		1.3 STRE	ET ADDRESS		•			
CITY-ST-ZIP	ORLANDO FL 32818		1,4 CITY-	ST-ZIP					
TITLE	T	☐ DELETE	2.1 TITLE				Change	- Addition	
NAME	HUNT, JR R		2.2 NAME	.			-		
STREET ADDRESS	ALOO CLARKEDONIETH DOAD		2.3 STRF	ET ADDRESS					
	ORLANDO FL 32818		2. 4 CITY					,	
CITY-ST-ZIP	T	☐ DELETE	3.1 TITLE				☐ Change	Addition	
	COLLAZO VENEITA		3.2 NAME				_ •	_	
NAME	COLLAZO, VENEITA						•		
STREET ADDRESS				ET ADDRESS					
CITY-ST-ZIP	ORLANDO FL 32818		3.4. CITY-				☐ Change	Addition	
TITLE]T	☐ DELETE	4.1 TITLE	ľ			. □ cuanda		
NAME	GREEN, REBECCA	- 12 %	_4. 2 NAME	E. ——	پ دستین≘ شک	ليمند ينكبوك الأ	مائات- مسجد		
STREET ADDRESS	2624 SILK WOOD CIR. APT. 623		4.3 STRE	ET ADDRESS					
CITY-ST-ZIP	ORLANDO FL 32808		4.4 CITY-	ST-ZIP					
TITLE		☐ DELETE	5.1 TITLE				Change	☐ Addition	
NAME			5.2 NAME	:					
STREET ADDRESS			5.3 STRE	ET ADDRESS			•		
CITY-ST-ZIP	1		5.4 CITY-	ST-ZIP				,	
TITLE		☐ DELETE	6.1 TITLE		-		Change	Addition	
NAME			6.2 NAME					,	
		•	6.3 STRE	ET ADORESS				,	
STREET ADDRESS	,		6.4 CITY-				•		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/14/99

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