FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # N97000001800 (8) New Cife Deliverance Bible Church,

FILED
Apr 02 1998 8:00am
Secretary of State

	inc.			
Principal Place of Business Mailing Address	noin			
2713 E. 18th Ove P.O. Box 75431		3. Date Incorporated or Qualified		
		4. FEI Number	Applied For	
		59-3441812 Tax #	Not Applicable	
2. Principal Place of Business AVP, 28. Mailing Address 21, 2713 F. K. AVP, 26. D.D.	50x 25431	5. Certificate of Status Desired	\$8.75 Additional Fee Regulred	
Suile, Apt. #, etc Suile, Apt. #, etc.		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
City & State City & State	City & State		7. is this nonprofit corporation a homeowners association?	
23 70 MY 10 28 70 MY 10 ZID	Country	8. This corporation owes or has paid the curr		
23 33605 25 NUKNOWA 23675	30 (1) Kmv		Yes No	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered	igent	
C II AIC -	81 Name	on Track!		
Gallon Altonso.	82 Street Add	tress (R.O. Box Number is Net Acceptable)		
mar channo AVE	3805	E. Anna		
Gallon, Alfonso 3805 E. Hanna ave.	83			
Tamba F1. 3340	84 <u>City</u>		85 Zip Code	
,,001,1	1 17am	<u> </u>	1 (336)()	
 Pursuant to the provisions of Sections 617 0502 and 617.1508. Florida office or registered agent. or both, in the State of Florida. Such change agent. I am familiar with, and accept the obligations of, Section 617.05 	Statutes, the above-named cor	p Aalion submits this statement for the purpose of	changing its registered	
agent. I am familiar with, and accept the obligations of, Section 617.05	503, Florida Striutes.	Ton's braid or directors. Thereby accept the appo	A S	
SIGNATURE ALBANSO COULON - HOSTOY	Works XI	3-1	2 -98	
Signature typest or profest maske of registered agent and theat applicable	(NOTE Relijistored Agent signature requ	ADDITIONS/CHANGES TO OFFICERS AND	DIDECTORS IN 40	
12. OFFICERS AND DIRECTORS	TE 11 TITLE		Change Addition	
NAME CAYLON ALKONSO	12 NAME		_ onange	
STREET ADDRESS 2000 6 Nan Da We	1.3 STREET ADDRESS			
CITY-ST-ZIP TO MODO EL 332677	1.4 CITY-S1-ZIP			
TITLE DELE			Change Addition	
NAME CONTON Tracy	2.2 NAME		•	
STREET ADDRESS POOR F. NAMAN NYC	2.3 STREET ADDRESS			
CITY-ST-ZIP 198 YY 50 FT 33610	2 4 CITY - S1 - ZIP			
TITLE			Change	
NAME MASEAIL TONGO V	3.2 NAME			
STREET ADDRESS 1819 Wind Terrace Apt 103	3.3 STREET ADORESS			
CITY-ST-ZIP DAMPA, +1 33613	3.4 CHY-S1-ZIP			
TITLE	TE 4.1 TITLE		Change	
NAME Myers, Annette not ,	4. 2 NAME			
STREET ADDRESS 11726 N. 58 th St. 1971 W	4.3 STREET ADDRESS			
CITY-ST-ZIP Tampa, F1. 33617	4 4 CITY - ST - 7IP		17 American	
TITLE DELE		· ·	Change Addition	
NAME Gallon, Leona	5.2 NAME		< 1/h	
STREET ADDRESS 1205 E. B. Ver COVE	5 3 STREET ADDRESS		101/d	
TOTAL TOTAL DELE	5 4 CHY-ST-ZIP TE 61 TITLE		Change	
NAME Naman Faxline	6 2 NAME	4000024762		
STREET ADDRESS PART HOLLING PART ADT C	6 3 STREET ADDRESS	-04/02/9801006	ก้เริ	
CITY-SI-ZIP TO STATE	6.4 City - ST - ZiP	***62.00	Hr 4. 1	
14. I hereby certify that the information supplied with this filling does not on	alify for the exemption stated in	Section 119 07/3Vi) Florida Statutes I further our	tify that the information	
indicated on this actual report or supplemental annual report is true ar officer or director of the corporation or the receiver or trustee empower	nd áccurate and that my signatu	ire shall have the same legal effect as if made und	ler oath: that I am an	
Block 12 or Block 13 if changed, or on an attachment with an adgress.	to occord this toport as feet	sales of chapter of the foliate of chatters, and that my	, name appears in	