

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005499

FILED
Jul 28, 2009
Secretary of State

Entity Name: ROCK OF EDEN DELIVERANCE CENTER, INC.

Current Principal Place of Business:

8152 NW 15 TH MANOR
PARK VILLAGE
PLANTATION, FL 33322

New Principal Place of Business:

99 NW 183RD ST.
SUITE #203
NORTH MIAMI, FL 33169

Current Mailing Address:

8152 NW. 15 TH MANOR
PARK VILLAGE
PLANTATION, FL 33322

New Mailing Address:

PO BOX 491431
FORT LAUDERDALE, FL 33349

FEI Number: 65-0792616 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

WILLIAMS, LEROY ANTHONY
8152 NW. 15 TH MANOR
PLANTATION, FL 33322 US

Name and Address of New Registered Agent:

WILLIAMS, LEROY A
8152 NW. 15TH MANOR
PLANTATION, FL 33322 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: LEROY A. WILLIAMS

07/28/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WILLIAMS, LEROY ANTHONY
Address: 8152 NW. 15 TH MANOR
City-St-Zip: PLANTATION, FL 33322

Title: VP () Delete
Name: RASMUSSEN, ALTHEA M
Address: P.O. BOX 9182
City-St-Zip: JUPITER, FL 33468

Title: C () Delete
Name: WILLIAMS, DEBORAH E
Address: 736 W.VIRGINIA STREET, APT#18
City-St-Zip: TALLAHASSEE, FL 32304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WILLIAMS, LEROY A
Address: 8152 NW. 15TH MANOR
City-St-Zip: PLANTATION, FL 33322

Title: VP (X) Change () Addition
Name: WILLIAMS, ALTHEA M
Address: 757 SE 17TH ST., #304
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LEROY A. WILLIAMS

PRES

07/28/2009

Electronic Signature of Signing Officer or Director

Date