

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000936

FILED
Jan 29, 2008
Secretary of State

Entity Name: YES LORD DELIVERANCE CHURCH OF GOD IN CHRIST, INC.

Current Principal Place of Business:

739 7TH STREET
CHIPLEY, FL 32428 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 196
CHIPLEY, FL 32428 US

New Mailing Address:

FEI Number: 59-3489323

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOODS, DAVID JR
102 LARAMIE CIRCLE
PANAMA CITY, FL 32404 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WOODS, DAVID JR
Address: 102 LARAMIE CIRCLE
City-St-Zip: PANAMA CITY, FL

Title: S () Delete
Name: ANDREWS, TRACEY
Address: P.O. BOX 921
City-St-Zip: CHIPLEY, FL

Title: T () Delete
Name: RHYNES, VANESSA
Address: P.O. BOX 52
City-St-Zip: CHIPLEY, FL

Title: O () Delete
Name: BULLOCK, AARON
Address: 714 PECAN STREET
City-St-Zip: CHIPLEY, FL

Title: D () Delete
Name: PATRICK, VERNITA
Address: 5027 E 13TH CT
City-St-Zip: PANAMA CITY, FL

Title: D () Delete
Name: CREWS, WILLIE A
Address: 627 BENNETT DR
City-St-Zip: CHIPLEY, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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City-St-Zip:

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: VANESSA RHYNES

T

01/29/2008

Electronic Signature of Signing Officer or Director

Date