2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2009
Secretary of State

DOCUMENT# N98000001703

Entity Name: NEW HOPE DELIVERANCE TEMPLE INC.

Current Principal Place of Business:

208 A-LANE
COCOA, FL 32926

New Principal Place of Business:

Current Mailing Address:

P O BOX 361623
MELBOURNE, FL 32936

New Mailing Address:

FEI Number: 59-3527073 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CARTER, LARRY
290 JOHNSON BLVD.
MELBOURNE, FL 32936 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: D ( ) Delete
Name: CARTER, LARRY
Address: P.O. BOX 361623
City-St-Zip: MELBOURNE, FL 32936

Title: D ( ) Delete
Name: JORDAN, MARY ANN
Address: 702 BLAKE AVE
City-St-Zip: COCOA, FL 32922

Title: D ( ) Delete
Name: DAVIS, DWIGHT
Address: 722 CARISSA AVE
City-St-Zip: COCOA, FL 32922

Title: D ( ) Delete
Name: DAVIS, GWEN
Address: 923 GROVE AVE
City-St-Zip: COCOA, FL 32922

Title: D ( ) Delete
Name: JAMES, LUWANI
Address: 1655 LEACH CIRCLE
City-St-Zip: TITUSVILLE, FL 32780

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:
Address:
City-St-Zip:

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

Title: D (X) Change ( ) Addition
Name: BROWNLEE, MAKEBA THOMAS
Address: 993 KING POST RD
City-St-Zip: ROCKLEDGE, FL 32955

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: LARRY CARTER D 03/23/2009

Electronic Signature of Signing Officer or Director — Date