

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001703

FILED  
Apr 27, 2012  
Secretary of State

**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  
Name: CARTER, LARRY  
Address: P.O. BOX 361623  
City-St-Zip: MELBOURNE, FL 32936

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

Title: D  
Name: CARTER, TANYA  
Address: 1210 AMHERST COURT  
City-St-Zip: COCOA, FL 32922

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

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

I hereby 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 all other like empowered.

SIGNATURE: LARRY CARTER

D

04/27/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date