

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 24, 2003 8:00 am
Secretary of State

03-24-2003 90197 023 ****61.25

DOCUMENT # N98000004322

1. Entity Name

**FAITH DELIVERANCE GOSPEL CENTER MINISTRIES, INCO
RPORATED**



Principal Place of Business

**2421 SOUTH STONE STREET
MELBOURNE FL 32901
US**

Mailing Address

**3222 HADDON AVENUE, NE
PALM BAY FL 32905
US**

2. Principal Place of Business

2224 Washington St

3. Mailing Address

Suite, Apt. #, etc.

City & State

Palm Bay, Florida

City & State

Suite, Apt. #, etc.

Zip

32905

Country

US

Zip

Country

Country

4. FEI Number **NOT APPLICABLE**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MARGUERITE, JONES A PASTOR
3222 HADDON AVENUE NE
PALM BAY FL 32905**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **JONES, MARGUERITE A PASTOR**
STREET ADDRESS **2421 SOUTH STONE STREET**
CITY-ST-ZIP **MELBOURNE FL 32901**

TITLE **VD** ☐ Delete
NAME **HADLEY, LEROY**
STREET ADDRESS **2421 SOUTH STONE STREET**
CITY-ST-ZIP **MELBOURNE FL 32901**

TITLE **SD** ☐ Delete
NAME **BIRKS, TIAJUANA A**
STREET ADDRESS **2421 SOUTH STONE STREET**
CITY-ST-ZIP **MELBOURNE FL 32901**

TITLE **TD** ☐ Delete
NAME **HADLEY, TOMMY L**
STREET ADDRESS **2421 SOUTH STONE STREET**
CITY-ST-ZIP **MELBOURNE FL 32901**

TITLE **D** ☐ Delete
NAME **O'NEAL, DARRYL**
STREET ADDRESS **2421 SOUTH STONE STREET**
CITY-ST-ZIP **MELBOURNE FL 32901**

TITLE **D** ☐ Delete
NAME **MCDONALD, FRANK**
STREET ADDRESS **2421 SOUTH STONE STREET**
CITY-ST-ZIP **MELBOURNE FL 32901**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Marguerite Jones* 3/14/03 (321) 433-9240

CR2E037 (10/02)