

FILED
May 24, 1999 8:00 am
Secretary of State

05-24-1999 90004 009 ****70.00

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # N98000005033

1. Corporation Name

DELIVERANCE CHURCH OF GOD INC.

Principal Place of business

3080 NW 7TH STREET
FT. LAUDERDALE FL 33311

Mailing Address

3080 NW 7TH STREET
FT. LAUDERDALE FL 33311

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 1437 N.W. 7th Avenue		2a 1437 N.W. 7th Ave		09/01/1998	
22 Suble, Apt. #, etc.		27 Suble, Apt. #, etc.		4. FEI Number	
22 Fort Lauderdale		27 Ft Lauderdale		Applied For ☐ Not Applicable ☒	
23 City & State		28 City & State		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
23 Florida		28 FL		6. Election Campaign Financing ☐ \$5.00 May Be Added to Fees	
24 Zip		29 Zip		10. Name and Address of New Registered Agent	
24 33311		29 33311		10. Name and Address of New Registered Agent	
25 Country		30 Country			
25 BROWARD		30 BROWARD			

CAMPBELL, WHITFIELD
1437 NW 7TH AVE.
FT. LAUDERDALE FL 33311

81 Name	N/A
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL
85 Zip Code	

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

NOTE: Registered Agent signature required when renouncing.

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME		1.2 NAME	Director
STREET ADDRESS		1.3 STREET ADDRESS	Rev Whitfield Campbell
CITY-ST-ZIP		1.4 CITY-ST-ZIP	1437 N. W. 7th Avenue
TITLE	☐ DELETE	2.1 TITLE	Fort Lauderdale, FL ☐ Change ☐ Addition
NAME		2.2 NAME	D- Estelle Brown
STREET ADDRESS		2.3 STREET ADDRESS	913 N. W. 12th Ave. Apt. I
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33311 ☐ Change ☐ Addition
TITLE	☐ DELETE	3.1 TITLE	
NAME		3.2 NAME	Director
STREET ADDRESS		3.3 STREET ADDRESS	Rev. Melda Harris
CITY-ST-ZIP		3.4 CITY-ST-ZIP	681 N. W. 37 Avenue ☐ Change ☐ Addition
TITLE	☐ DELETE	4.1 TITLE	Ft. Lauderdale, FL 33311
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 4-107(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **WHITFIELD CAMPBELL**

5-17-99 (97) 524-1454

SIGNATURE AND TYPED OR PRINTED NAME OF BUSINESS OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)

