

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005606

FILED
Feb 22, 2008
Secretary of State

Entity Name: JESUS THE LIVING WORD OF DELIVERANCE CHURCH, INC.

Current Principal Place of Business:

P. O. BOX 1443
JASPER, FL 32052

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 1443
JASPER, FL 32052

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HAWKINS, KATHY
116 SW 6TH STREET
JASPER, FL 32052 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: PD () Delete
Name: HAWKINS, KATHY
Address: 116 SW 6TH STREET
City-St-Zip: JASPER, FL 32052

Title: VPD () Delete
Name: HAWKINS, MARK JR
Address: 116 SW 6TH STREET
City-St-Zip: JASPER, FL 32052

Title: SD () Delete
Name: JACKSON, MARY ANN
Address: RTE 2 BOX 355
City-St-Zip: JASPER, FL 32052

Title: T () Delete
Name: HAWKINS, NANCY
Address: 116 SW 6TH STREET
City-St-Zip: JASPER, FL 32052

Title: TR () Delete
Name: BENNETT, CORNELIUS
Address: 116TH S.W. 6TH ST.
City-St-Zip: JASPER, FL 32052

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: () 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: KATHY HAWKINS

PD

02/22/2008

Electronic Signature of Signing Officer or Director

Date