

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000007220

FILED  
Mar 03, 2009  
Secretary of State

Entity Name: DAVID TEMPLE OF DELIVERANCE, INC.

**Current Principal Place of Business:**

955C ORANGE AVE  
DAYTONA BEACH, FL 32114 US

**New Principal Place of Business:**

**Current Mailing Address:**

955C ORANGE AVE  
DAYTONA BEACH, FL 32114 US

**New Mailing Address:**

FEI Number: 52-2143142      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DAVID, A.L.  
676 WINCHESTER AVENUE  
DAYTONA BEACH, FL 321141970 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: DAVID, A.L. ELDER  
Address: 676 WINCHESTER AVENUE  
City-St-Zip: DAYTONA BEACH, FL 321141970

Title: D ( ) Delete  
Name: DAVID, HARRIETT N  
Address: 676 WINCHESTER AVENUE  
City-St-Zip: DAYTONA BEACH, FL 321141970

Title: D ( ) Delete  
Name: MCRAE, DOROTHY  
Address: 616 CEDAR PARK DRIVE  
City-St-Zip: DAYTONA BEACH, FL 32114

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: DAVID, A.L. PASTOR  
Address: 676 WINCHESTER AVENUE  
City-St-Zip: DAYTONA BEACH, FL 321141970

Title: D (X) Change ( ) Addition  
Name: DAVID, HARRIETT N CO-PAST  
Address: 676 WINCHESTER AVENUE  
City-St-Zip: DAYTONA BEACH, FL 321141970

Title: D (X) Change ( ) Addition  
Name: MCRAE, DOROTHY MOTHER  
Address: 616 CEDAR PARK DRIVE  
City-St-Zip: DAYTONA BEACH, FL 32114

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: PASTOR ALLEN LEON DAVID

PAST

03/03/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date