2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006
Secretary of State

DOCUMENT# N99000003169

Entity Name: DELIVERANCE CENTER MINISTRY INC.

Current Principal Place of Business:

3974-76
OPA LOCKA, FL 33054

New Principal Place of Business:

3974-76 N.W. 167 ST
OPA LOCKA, FL 33054

Current Mailing Address:

19101 W OAKMONT DRIVE
HIALEAH, FL 33015

New Mailing Address:

FEI Number: 65-0921424 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JOHNSON, CONNELL
19101 W OAKMONT DRIVE
HIALEAH, FL 33015 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: DP ( ) Delete
Name: JOHNSON, CONNELL
Address: 19101 W OAKMONT DRIVE
City-St-Zip: HIALEAH, FL 33015

Title: DV ( ) Delete
Name: JOHNSON, PEGGY
Address: 19101 W OAKMONT DRIVE
City-St-Zip: HIALEAH, FL 33015

Title: DS ( ) Delete
Name: MCGREE, DONYALE
Address: 12856 SW 50TH STREET
City-St-Zip: MIRAMAR, FL 33027

Title: DT ( ) Delete
Name: MCGHEE, ROMANDO
Address: 12856 SW 50TH STREET
City-St-Zip: MIRAMAR, FL 33027

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: PEGGY JOHNSON DV 04/27/2006

Electronic Signature of Signing Officer or Director — Date