

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004562

FILED
Aug 29, 2007
Secretary of State

Entity Name: UNITED DELIVERANCE COMMUNITY RESOURCE CENTER, INC.

Current Principal Place of Business:

821 GRANT STREET
WEST PALM BEACH, FL 33407

New Principal Place of Business:

Current Mailing Address:

821 GRANT STREET
WEST PALM BEACH, FL 33407

New Mailing Address:

FEI Number: 65-0934270 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WHITE, LEWIS E
624 35TH STREET
WEST PALM BEACH, FL 33407 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: CD () Delete
Name: WILSON, FRANK
Address: 1473 W 28TH STREET
City-St-Zip: RIVIERA BEACH, FL 33404

Title: VCD () Delete
Name: WILLIAMS, MATTHEW
Address: 610 7TH STREET
City-St-Zip: LAKE PARK, FL 33404

Title: D () Delete
Name: GRIMES, ANTHONY
Address: 7715 77TH WAY
City-St-Zip: WEST PALM BEACH, FL 33407

Title: TD () Delete
Name: LOWERY, SADIE
Address: 506 HURON PLACE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: SD () Delete
Name: MCNEAL, VENDETTA A
Address: 1210 W 26TH ST
City-St-Zip: RIVIERA BEACH, FL 33404

Title: () Delete
Name:
Address:
City-St-Zip:

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:

Title: D () Change (X) Addition
Name: ROBERT, BLAIR
Address: 724 48TH STREET APT. B
City-St-Zip: WEST PALM BEACH, FL 33407

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: SANDRA J. WHITE

ED

08/29/2007

Electronic Signature of Signing Officer or Director

_____ Date