

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 715861

**Entity Name:** ST. ELIZABETH CHURCH OF DELIVERANCE OF GIFFORD, FLORIDA, INC.

**FILED**  
**Mar 02, 2022**  
**Secretary of State**  
**1608512190CC**

**Current Principal Place of Business:**

4475 29TH AVENUE  
VERO BEACH, FL 32967-1421

**Current Mailing Address:**

P.O. BOX 6279  
VERO BEACH, FL 32961

**FEI Number: 68-0608027**

**Certificate of Status Desired: Yes**

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

PETERSON, SR., ORVILLE N  
6433 55TH SQUARE  
VERO BEACH, FL 32967 US

*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

**Officer/Director Detail :**

Title PD  
Name PETERSON, SR., ORVILLE N  
Address 6433 55TH SQUARE  
City-State-Zip: VERO BEACH FL 32967

Title VTD  
Name PETERSON, CONSTANCE A  
Address 6433 55TH SQUARE  
City-State-Zip: VERO BEACH FL 32967

Title STD  
Name CORDY, JACK  
Address P.O. BOX 897  
City-State-Zip: FORT PIERCE FL 34954

Title SD  
Name WISEMAN, DEBRA A  
Address 290 13TH PLACE #202  
City-State-Zip: VERO BEACH FL 32960

Title D  
Name PIERRE, EMMANUEL  
Address 611 24TH PLACE  
City-State-Zip: VERO BEACH FL 32962

*I hereby 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 all other like empowered.*

SIGNATURE: JACK CORDY

STD

03/02/2022

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date