

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 761180

**FILED**  
**Feb 22, 2015**  
**Secretary of State**  
**CC0467329697**

**Entity Name:** THE JESUS CHURCH OF DELIVERANCE OF THE APOSTOLIC FAITH, INC.

**Current Principal Place of Business:**

2782 FORMAN CIR.  
MIDDLEBURG, FL 32068

**Current Mailing Address:**

2798 FORMAN CIR.  
MIDDLEBURG, FL 32068

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: Yes**

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

OLIVER, GLEN J  
2798 FORMAN CIRCLE  
MIDDLEBURG, FL 32068 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 VP  
Name CLAYTON, HERBERT DEACON  
Address 2646 SAPP LN  
City-State-Zip: MIDDLEBURG FL 32068

Title P  
Name OLIVER, GLEN J  
Address 2798 FORMAN CIR  
City-State-Zip: MIDDLEBURG FL 32068

Title SD  
Name OLIVER, CARLA S  
Address 2798 FORMAN CIRCLE  
City-State-Zip: MIDDLEBURG FL 32068

Title T  
Name OLIVER, GLEN JII  
Address 2792 FORMAN CIRCLE  
City-State-Zip: MIDDLEBURG FL 32068

*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: GLEN J OLIVER SR**

**PRESIDENT**

**02/22/2015**

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

\_\_\_\_\_  
Date