Entity Name: TEMPLE OF DELIVERANCE INTERNATIONAL MINISTRIES INC. **Current Principal Place of Business:** 730 AVE B SW WINTER HAVEN, FL 33880 **Current Mailing Address: PO BOX 645** WINTER HAVEN. FL 33882 FEI Number: 26-2648564 Name and Address of Current Registered Agent: MCKINZIE, ERVIN ELDER 730 AVENUE B SW WINTER HAVEN, FL 33880 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:

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0800006055

Title PD Title VPD MCKINZIE, ERVIN SR. Name MCKINZIE, LENORA Name 730 AVENUE B SW Address 730 AVENUE B SW Address City-State-Zip: WINTER HAVEN FL 33880 WINTER HAVEN FL 33880 City-State-Zip: Title TD Title SD Name MCKINNEY, LEROY Name MCKINNEY, LORNA Address 9820 50TH STREET CIR E Address 9820 50TH STREET CIR E PARRISH FL 34219 City-State-Zip: City-State-Zip: PARRISH FL 34219 Title DIRECTOR Title D Name HARVEY, NICKITA L **GRAHAM. STEPHANIE** Name Address 3008 BUCKEYE PT DR 2312 CYPRESS GARDENS BLVD Address City-State-Zip: WINTER HAVEN FL 33881 City-State-Zip: WINTER HAVEN FL 33884

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: LORNA MCKINNEY

Electronic Signature of Signing Officer/Director Detail

FILED

Certificate of Status Desired: Yes

Date

02/05/2015

SD

Officer/Director Detail :

Electronic Signature of Registered Agent