

**2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000001433

**Entity Name:** LIGHTHOUSE OF DELIVERANCE MINISTRIES, INC.**Current Principal Place of Business:**743 S. CENTRAL AVE.  
APOPKA, FL 32703**Current Mailing Address:**743 S. CENTRAL AVE.  
APOPKA, FL 32703 US**FEI Number: 16-1673947****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**WEATHERS, NATHANIEL JR  
1433 FALCONWOOD COURT  
APOPKA, FL 32712 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	PCEO
Name	WEATHERS, NATHANIEL JR
Address	1433 FALCONWOOD CT.
City-State-Zip:	APOPKA FL 32712

Title	VP
Name	WEATHERS, PATRICIA
Address	1433 FALCONWOOD CT.
City-State-Zip:	APOPKA FL 32712

Title	T
Name	DAVIS, CONSTANCE YVETTE
Address	595 W CHURCH ST APT 715
City-State-Zip:	OLANDO FL 32805

Title	S
Name	HAMILTON, MARGARET
Address	6357 REDWOOD OAKS DRIVE
City-State-Zip:	ORLANDO FL 32818

Title	DIRECTOR
Name	CURRY, MICHEAL
Address	15 PINE FOREST PLACE
City-State-Zip:	APOPKA FL 32703

Title	DIRECTOR
Name	JONES, MARJORIE
Address	3287 HARRY ST
City-State-Zip:	APOPKA FL 32712

Title	SECRETARY
Name	BAILEY, VALORIE TANEISHA
Address	1308 CYPRESS AVE
City-State-Zip:	SANDFORD FL 32771

Title	DIRECTOR
Name	WHITE, JOHN LEE
Address	200 WEST AVE. 28
City-State-Zip:	MAITLAND FL 32751

*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: NATHANIEL WEATHERS JR****PRESIDENT****04/02/2025**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date