

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000143859

Entity Name: DELIVERANCE TAX & INSURANCE SERVICES INC

Current Principal Place of Business:

2435 S FRENCH AVE
SUITE A
SANFORD, FL 32771

Current Mailing Address:

2435 S FRENCH AVE
SUITE A
SANFORD, FL 32771

FEI Number: 20-1124841

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PATINA, POWELL T
1788 BELL AVE
SANFORD, FL 32771 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 P
Name POWELL, PATINA T
Address 1788 BELL AVE
City-State-Zip: SANFORD FL 32771

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PATINA POWELL

PRESIDENT

04/30/2015

Electronic Signature of Signing Officer/Director Detail

Date