2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#712810

FILED May 08, 2007 Secretary of State

Entity Name: TABERNACLE CHURCH OF DELIVERENCE, INC.

urrent P	rincipal Place of Business:	New Principal Pla	ce of Business:
907 AVE	NUE S RCE, FL 34947		
Current M	lailing Address:	New Mailing Addr	ess:
	RIDA AVENUE RCE, FL 34950		
El Number	: FEI Number Applied For() FEI	l Number Not Applicable (X)	Certificate of Status Desired (X)
n accordan	ice with s. 607.193(2)(b), F.S., the corporation did not rece		Continuate of States Desired (X)
lame and	Address of Current Registered Agent:	Name and Address	s of New Registered Agent:
509 FLOI	, DOROTHY L RIDA AVENUE RCE, FL 34947 US		
	e named entity submits this statement for the purpose of Florida.	se of changing its registe	ered office or registered agent, or both
	e of Florida.	se of changing its registe	ered office or registered agent, or both
the State	e of Florida.	se of changing its registe	ered office or registered agent, or both Date
n the State	e of Florida. RE:		
n the State SIGNATUI DFFICER itle: ame: ddress:	e of Florida. RE: Electronic Signature of Registered Agent		Date
n the State	e of Florida. RE: Electronic Signature of Registered Agent S AND DIRECTORS: PD () Delete GORDON, HARRY 1509 FLORIDA AVENUE	ADDITIONS/CHAN Title: Name: Address:	Date IGES TO OFFICERS AND DIRECTO
The State of the S	e of Florida. RE: Electronic Signature of Registered Agent S AND DIRECTORS: PD () Delete GORDON, HARRY 1509 FLORIDA AVENUE FORT PIERCE, FL 34950 VD () Delete GORDON, DOROTHY L 1509 FLORIDA AVENUE	ADDITIONS/CHAN Title: Name: Address: City-St-Zip: Title: Name: Address:	Date IGES TO OFFICERS AND DIRECTO () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: HARRY GORDON PD 05/08/2007