

**2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 712810

**FILED**  
**Mar 14, 2011**  
**Secretary of State**

**Entity Name:** TABERNACLE CHURCH OF DELIVERENCE, INC.

**Current Principal Place of Business:**

2907 AVENUE S  
FORT PIERCE, FL 34947

**New Principal Place of Business:**

**Current Mailing Address:**

2826 STONEWAY LANE  
B  
FORT PIERCE, FL 34982

**New Mailing Address:**

**FEI Number:** 65-0790301      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

GORDON, DOROTHY L  
1920 N. 44TH STREET  
FORT PIERCE, FL 34947      US

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

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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: GORDON, DOROTHY  
Address: 1920 N. 44TH STREET  
City-St-Zip: FORT PIERCE, FL 34947

Title: VD  
Name: GORDON, WILLIE J  
Address: 4309 EVERGREEN AVE  
City-St-Zip: FORT PIERCE, FL 34947

Title: S  
Name: BELL, EDNA  
Address: 3009 AVE S  
City-St-Zip: FT. PIERCE, FL 34947

Title: TD  
Name: GORDON, LARRY  
Address: 112 SOUTH 17TH STREET  
City-St-Zip: FT. PIERCE, FL 34950

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: DOROTHY L GORDON

PD

03/14/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date