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: KARTRICE GREAVES

I

Electronic Signature of Signing Officer/Director Detail

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731755

Entity Name: TABERNACLE OF WITNESS DELIVERANCE CHURCH, INCORPORATED

Current Principal Place of Business:

901 HARLEM ACADEMY AVE CLEWISTON, FL 33440

Current Mailing Address:

901 HARLEM ACADEMY AV CLEWISTON, FL 33440 US

FEI Number: 65-0008000

Name and Address of Current Registered Agent:

SIMMONS, SAMUEL A 901 HARLEM ACADEMY AV CLEWISTON, FL 33440 US

FILED Apr 14, 2016 Secretary of State CC4276419291

Date

Certificate of Status Desired: No

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

Officer/Director Detail :

Title	PRESIDENT	Title	Т	
Name	WRISPER, SYLVIA W	Name	GREAVES, JEREMY	
Address	901 HARLEM AVE	Address	1009 BAYBERRY LOOP	
City-State-Zip:	CLEWISTON FL 33440	City-State-Zip:	CLEWISTON FL 33440	
Title	VP	Title	AS	
Title Name	VP GREAVES, KARTRICE	Title Name	AS GARY, KATURAH A	
Name	GREAVES, KARTRICE	Name	GARY, KATURAH A	

04/14/2016

Date

VICE PRESIDENT