## 2017 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 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

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

FILED Mar 01, 2017

**Secretary of State** 

CC9126209038

## Officer/Director Detail:

Title PRESIDENT Title T

NameWRISPER, SYLVIA WNameGREAVES, JEREMYAddress901 HARLEM AVEAddress1009 BAYBERRY LOOPCity-State-Zip:CLEWISTON FL 33440City-State-Zip:CLEWISTON FL 33440

Title VP Title AS

NameGREAVES, KARTRICENameGARY, KATURAH AAddress1009 BAYBERRY LOOPAddress805 MARYLAND AVCity-State-Zip:CLEWISTON FL 33440City-State-Zip:CLEWISTON FL 33440

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

VICE PRESIDENT

03/01/2017