

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

FILED
 Jul 23 1998 8:00am
 Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
 Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 731755 (5)
 1. Corporation Name
 TABERNACLE OF WITNESS DELIVERANCE CHURCH, INCORPORATED



Principal Place of Business Mailing Address
 9TH ST HARLEM ACADEMY AVE 1136 CAROLINA AVE
 1136 CAROLINA AVE P.O. BOX 562
 CLEWISTON FL 33440 CLEWISTON FL 33440
 US US

3. Date incorporated or Qualified
 01/28/1975

4. FEI Number 65-0008000
 Applied For Not Applicable

2. Principal Place of Business 2a. Mailing Address
 21 T. W. D. Church Incorp 26 1136 Carobina ave

5. Certificate of Status Desired \$8.75 Additional Fee Required

Suite, Apt. #, etc. 27 9th St Harlem Academy ave

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

City & State 28 Clewiston, FL

7. Is this nonprofit corporation a homeowners association? Yes No

Zip Country 29 33440 Hendry 30 33440 Hendry

8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
 SIMMONS, SAMUEL A
 1136 CAROLINA AVE N
 CLEWISTON FL 33440

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City FL 85 Zip Code

11. Pursuant to the provisions of sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 617.0503, Florida Statutes.

SIGNATURE Pastor Bernice McMillan DATE July 14, 1998
 (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	1.1 TITLE	70
NAME	MCCOY, WILLIE	1.2 NAME	Bernice McMillan
STREET ADDRESS	1234 LOUISIANA STREET	1.3 STREET ADDRESS	1136 Carobina ave
CITY-ST-ZIP	CLEWISTON FL 33440	1.4 CITY-ST-ZIP	Clewiston, FL 33440
TITLE	VD	2.1 TITLE	V
NAME	JOHNSON, WILLIE	2.2 NAME	Sylvia d. Watson
STREET ADDRESS	928 ALABAMA AVENUE	2.3 STREET ADDRESS	946 Virginia ave
CITY-ST-ZIP	CLEWISTON FL 33440	2.4 CITY-ST-ZIP	Clewiston, FL 33440
TITLE	SD	3.1 TITLE	S
NAME	SCOTT, MARZETTA	3.2 NAME	Keturah a. Gary
STREET ADDRESS	1122 CAROLINA AVENUE	3.3 STREET ADDRESS	805 Maryland ave
CITY-ST-ZIP	CLEWISTON FL 33440	3.4 CITY-ST-ZIP	Clewiston, FL 33440
TITLE	CD	4.1 TITLE	
NAME	FRANKLIN, FARNEY	4.2 NAME	
STREET ADDRESS	539 WEST ALVERDEZ	4.3 STREET ADDRESS	
CITY-ST-ZIP	CLEWISTON FL 33440	4.4 CITY-ST-ZIP	
TITLE	MD	5.1 TITLE	MD
NAME	FRANKLIN, MARY	5.2 NAME	Dorothy, Franklin
STREET ADDRESS	731 COMMERCIO STREET	5.3 STREET ADDRESS	539 W Alverdez
CITY-ST-ZIP	CLEWISTON FL 33440	5.4 CITY-ST-ZIP	Clewiston, FL
TITLE	TD	6.1 TITLE	TD
NAME	MCCOY, CHARLES	6.2 NAME	Willie Johnson
STREET ADDRESS	1217 CAROLINA AVENUE	6.3 STREET ADDRESS	928 Alabama, ave
CITY-ST-ZIP	CLEWISTON FL 33440	6.4 CITY-ST-ZIP	Clewiston, FL 33440

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Pastor Bernice McMillan DATE July 14, 1998 941-983-6382
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E037 (5/98)