### 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005275

Entity Name: TABERNACLE OF DELIVERANCE MINISTRIES, INC.

FILED
Mar 07, 2016
Secretary of State
CC5288793268

# **Current Principal Place of Business:**

407 E. BOOE ST. BUNNELL. FL 32110

# **Current Mailing Address:**

PO BOX 279

BUNNELL, FL 32110 US

FEI Number: 55-0914565 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

BROOKS, NATHANIEL 100 BIG BEN DR DAYTONA BEACH, FL 32117 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

#### Officer/Director Detail:

Title P Title \

Name BROOKS, NATHANIEL Name BROOKS, SHELLEY A
Address 100 BIG BEN DR Address 100 BIG BEN DR

City-State-Zip: DAYTONA BEACH FL 32117 City-State-Zip: DAYTONA BEACH FL 32117

Title S Title T

NameNELSON, JACQUELINENameWILLIAMS, JAMESAddress25 RYKER LNAddress410 PEACH STCity-State-Zip:PALM COAST FL 32164City-State-Zip:BUNNELL FL 32110

City-State-Zip: PALM COAST FL 32164

Title TREASURER

Name SCARBOUGH, MAY C T
Address 9 RYECROFT LANE
City-State-Zip: PALM COAST FL 32164

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: NATHANIEL BROOKS

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

03/07/2016