

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Aug 10, 2006  
Secretary of State**

DOCUMENT# N95000001391

**Entity Name:** TABERNACLE OF DELIVERANCE OUT REACH MINISTRIES INC.

**Current Principal Place of Business:**

1120 SW SILVER SPRINGS BOULEVARD  
OCALA, FL 34475 US

**New Principal Place of Business:**

**Current Mailing Address:**

1120 SW SILVER SPRINGS BOULEVARD  
OCALA, FL 34475 US

**New Mailing Address:**

**FEI Number:** 59-3319732      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

BROWN, ROZELLA  
1217 NE OSCEOLA AVE.  
OCALA, FL 34470 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: P ( ) Delete  
Name: BROWN, ROZELLA  
Address: 1217 NE OSCEOLA AVE  
City-St-Zip: Ocala, FL

Title: T ( ) Delete  
Name: JACKSON, MARY  
Address: 1613 NW 20TH AVE  
City-St-Zip: Ocala, FL

Title: D ( ) Delete  
Name: JACKSON, LORETTA  
Address: 1217 NE OSCEOLA AVE  
City-St-Zip: Ocala, FL

Title: D ( ) Delete  
Name: BENNETT, BARBARA  
Address: 2614 NW 21ST STREET  
City-St-Zip: Ocala, FL 34475

Title: D ( ) Delete  
Name: JACKSON, EDDIE L JR.  
Address: 1930 NW 27TH AVENUE  
City-St-Zip: Ocala, FL 34470

Title: S ( ) Delete  
Name: BROWN, CHRISTINE  
Address: 1120 SW BROADWAY  
City-St-Zip: Ocala, FL 34474

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: JACKSON, LORETTA  
Address: 6251 SE 36TH AVE  
City-St-Zip: Ocala, FL

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: JACKSON, EDDIE L JR.  
Address: 6251 SE 36TH AVENUE  
City-St-Zip: Ocala, FL

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LORETTA JACKSON

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

DIR

08/10/2006

\_\_\_\_\_  
Date