2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001391

Entity Name: TABERNACLE OF DELIVERANCE OUT REACH MINISTRIES INC.

FILED Mar 26, 2013 Secretary of State CC9561935848

Current Principal Place of Business:

1120 SW SILVER SPRINGS BOULEVARD OCALA. FL 34475

Current Mailing Address:

1120 SW SILVER SPRINGS BOULEVARD OCALA, FL 34475 US

FEI Number: 59-3319732 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROWN, ROZELLA 1120 SW SILVER SPRINGS BOULEVARD OCALA, FL 34474 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 7

Name BROWN, ROZELLA Name JACKSON, MARY

Address 1120 WEST SS BOULEVARD Address 1120 WEST SS BOULEVARD

City-State-Zip: OCALA FL 34474 City-State-Zip: OCALA FL 34474

Title D Title D

Name JACKSON, LORETTA Name BENNETT, BARBARA

Address 1120 WEST SS BOULEVARD Address 1120 WEST SS BOULEVARD

City-State-Zip: OCALA FL 34474 City-State-Zip: OCALA FL 34474

Title D Title S

NameJACKSON, EDDIE LJR.NameBROWN, CHRISTINEAddress1120 WEST SS BOULEVARDAddress1120 SW BROADWAY

City-State-Zip: OCALA FL City-State-Zip: OCALA FL 34474

Title DIRECTOR
Name TOMLIN, ALICE

Address 1120 WEST SS SPRINGS BLVD

City-State-Zip: OCALA FL 34475

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: LORETTA F JACKSON DIRECTOR 03/26/2013