2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001391

Entity Name: TABERNACLE OF DELIVERANCE OUT REACH MINISTRIES INC.

FILED May 01, 2016 **Secretary of State** CC0051592440

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:

Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title Title

BROWN, ROZELLA JACKSON, MARY Name Name

1120 WEST SS BOULEVARD 1120 WEST SS BOULEVARD Address Address

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

Title D Title D

Name BENNETT, BARBARA Name JACKSON, LORETTA

Address 1120 WEST SS BOULEVARD Address 1120 WEST SS BOULEVARD

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

Title S Title D

Name **BROWN, CHRISTINE** JACKSON, EDDIE LJR. Name Address 1120 SW BROADWAY 1120 WEST SS BOULEVARD Address City-State-Zip: OCALA FL 34474

City-State-Zip: OCALA FL

Title DIRECTOR

JACKSON, EDDIE L SR. Name

1120 W SILVER SPRINGS BLVD Address

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.

05/01/2016 SIGNATURE: LORETTA F JACKSON DIRECTOR