


**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 19, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # 721040 1. Entity Name ANOINTING CHRISTIAN FELLOWSHIP, INC.	
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Principal Place of Business 2108 EAST IDA STREET TAMPA, FL 33610	Mailing Address 2108 EAST IDA STREET TAMPA, FL 33610
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01302004 No Chg-NP CR2E037 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-3280340	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  DAWSON, JAMES E 19216 RIDGELAKE DRIVE LUTZ, FL 33549	<b>DO NOT WRITE IN THIS SPACE</b>
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

Filing Fee is \$61.25 Due by May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000057921 02/20/04-80008-023 70.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DAWSON, JAMES E 19216 RIDGELAKE DRIVE LUTZ, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAMS, COLLER 10705 PRESERVE LAKE DRIVE TAMPA, FL 33626
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JACKSON, JOYCE 10906 N HYACINTH AVE TAMPA, FL 33612
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LILLIE, EMMA 2223 E IDA STREET TAMPA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JONES, BARBARA J 911 EAST 24TH STREET TAMPA, FL 33610
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: James E. Dawson      Date: 2/16/04      Daytime Phone#: (813) 238-4093