

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000070755

FILED  
Apr 30, 2007  
Secretary of State

Entity Name: ANOINTED TROUPE OF CHRIST, LLC

## Current Principal Place of Business:

MIRANDA PETE  
4477 WESTOVER DRIVE  
TALLAHASSEE, FL 32303

## New Principal Place of Business:

MIRANDA PETE  
1665 HUTCHINSON FERRY RD  
QUINCY, FL 32353

## Current Mailing Address:

MIRANDA PETE  
4477 WESTOVER DRIVE  
TALLAHASSEE, FL 32303

## New Mailing Address:

MIRANDA PETE  
1665 HUTCHINSON FERRY RD  
QUINCY, FL 32353

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PETE, MIRANDA  
4477 WESTOVER DRIVE  
TALLAHASSEE, FL 32303 US

## Name and Address of New Registered Agent:

PETE, MIRANDA  
1665 HUTCHINSON FERRY RD  
QUINCY, FL 32353 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: MIRANDA PETE

04/30/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: PETE, MIRANDA  
Address: 4477 WESTOVER DRIVE  
City-St-Zip: TALLAHASSEE, FL 32303

Title: MGRM ( ) Delete  
Name: MARINER, KETRINA  
Address: 4497 COOL EMERALD DRIVE  
City-St-Zip: TALLAHASSEE, FL 32303

Title: MGRM ( ) Delete  
Name: WILLIAMS, JACQUE  
Address: 2952 EUGENE BAILEY ROAD  
City-St-Zip: TALLAHASSEE, FL 32308

Title: MGRM ( ) Delete  
Name: GROVEY, JACOB  
Address: 2277 HARTSFIELD RD., APT. 1  
City-St-Zip: TALLAHASSEE, FL 32303

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: PETE, MIRANDA  
Address: 1665 HUTCHINSON FERRY RD  
City-St-Zip: QUINCY, FL 32353

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MIRANDA PETE

MGR

04/30/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date