

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

FILED
Jan 08, 2004 08:00 AM
Secretary of State

DOCUMENT # N01000005851

1. Entity Name
ANOINTED HOUSE OF PRAYER, INC.



Principal Place of Business
**2 EAST COLLINS STREET
UMATILLA, FL 32784**

Mailing Address
**2228 NORTHEAST 98TH STREET
ANTHONY, FL 32617**



01062004 No Chg-NP CR2E037 (10/03)

4. FEI Number
59-3541718

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145**

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable

(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 ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
ANTIS, ROBERT D
2 EAST COLLINS STREET
UMATILLA, FL 32784**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**STD
ANTIS, VIOLET F
2 EAST COLLINS STREET
UMATILLA, FL 32784**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ADKINSON, MYRTIE L
2 EAST COLLINS STREET
UMATILLA, FL 32784**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
MISHOW, CHARLES L
2 EAST COLLINS ST.
UMATILLA, FL 32784**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U000000000970
01/08/04-80016-005 70.00

**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)(f), 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: *Violet F Antis*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date *1-6-04*

Daytime Phone #