

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005 8:00 am
Secretary of State

04-29-2005 90220 032 ****70.00

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

14007809



DO NOT WRITE IN THIS SPACE

01122005 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**

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, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

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

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

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

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

TITLE D
NAME *Booker, Earnest D.*
STREET ADDRESS *2 East Collins St*
CITY-ST-ZIP *Umatilla 31 32784*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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)(l), 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: *Jane Antis*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/16/05

Date

352-732-

Daytime Phone #

5047