## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # N02000004607**

1. Entity Name

FRESH ANOINTING INTERNATIONAL MINISTRIES, INC.



FILED Apr 24, 2007 08:00 AM Secretary of State

Principal Place of Business

10935 SE 177TH PLACE

SUTIE 407 SUMMERFIELD, FL 34491 Mailing Address

10935 SE 177TH PLACE SUTIE 407

SUMMERFIELD, FL 34491



04232007 No Chg-NP

CR2E037 (4/06)

4. FEI Number 02-0663450

Applied For Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LUDWIG, CHRIS J 5360 NE 2ND LANE OCALA, FL 34470

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the ions of registered agent.	purpose of changing its registered	office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent set				e required when reinstating)	DATE	
	Filing Fee is \$61.25 Due by May 1, 2007	Election Campaign Financ     Trust Fund Contribution	ing	\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LUDWIG, CHRIS J 5360 NE 2ND LANE OCALA, FL 34470		U00000728511 05/07/07-80020-007 70.00			
NAME Street Address City-St-Zip	D LUDWIG, HELEN L 2090 SE 23TH TERRACE OCALA, FL 34480					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LUDWIG, CHRIS M 4090 SE 23TH TERRACE OCALA, FL 34480			DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-S1-ZIP	D LUDWIG, MICHAEL P 4090 SE 23TH TERRACE OCALA, FL 34480	·	IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SPADONI, RON 1 CEDAR DRIVE SAINT CLOUD, FL 34772					
TITLE NAME	D LUDWIG, SARA E					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: \(\frac{1}{2}\)

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND PREE

5360 SE 2ND LANE

OCALA, FL 34470

Luly CHRIS T LUDWY

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20-347-9443

Daytime Phone #