## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000001824

FILED May 16, 2006 Secretary of State

Entity Name: ANOINTED WORD MINISTRIES INTERNATIONAL INC.

**Current Principal Place of Business: New Principal Place of Business:** 1720 NW 26 TERRACE FT LAUDERDALE, FL 33311 **Current Mailing Address: New Mailing Address:** 1720 NW 26 TERRACE FT LAUDERDALE, FL 33311 FEI Number: 13-4239082 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BENEFIELD, AMOS 1720 NW 278TH TERRACE US FT LAUDERDALE, FL 33311 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete BENEFIELD, AMOS BENEFIELD, AMOS JR Name: Name: 1720 NW 26 TERRACE Address: 1720 NW 26 TERRACE Address: City-St-Zip: FT LAUDERDALE, FL 33311 City-St-Zip: FT LAUDERDALE, FL 33311 Title: Title: ( ) Delete () Change () Addition BENEFIELD, YOSHIKO Name: Name: Address: 1720 N W 26TH TERRACE Address: City-St-Zip: FT LAUDERDALE, FL 33311 City-St-Zip: Title: () Delete Title: () Change () Addition BENEFIELD, AMOS SR Name: Name: 1720 N W 26TH TERRACE Address: Address: City-St-Zip: FT LAUDERDALE, FL 33311 City-St-Zip: Title: ( ) Delete Title: () Change () Addition BENEFIELD, MARY Name: Name: 1720 NW 26TH TERRACE Address: Address: City-St-Zip: FT LAUDERDALE, FL 33311 City-St-Zip: Title: () Delete Title: () Change () Addition WATSON, CARROLL Name: Name: 107 CONTINENTAL DRIVE Address: Address: City-St-Zip: FT LAUDERDALE, FL 33311 City-St-Zip: Title: () Delete Title: () Change () Addition DAVIS. JULIA E Name: Name: Address: 91 SPRINGS STREET Address: CHARLESTON, SC 29403 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AMOS BENEFIELD JR PRES 05/16/2006