2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2009
Secretary of State

DOCUMENT# N03000009626

Entity Name: ANAGGELLO GLOBAL MISSIONS, INC.

Current Principal Place of Business:

6550 NE 21ST DR
FT LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

6550 NE 21ST DR
FT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 52-2404902 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIAMS, J. KIRBY
6550 NE 21ST DR
FT LAUDERDALE, FL 33308 US

Name and Address of New Registered Agent:

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:

Title: D ( ) Delete
Name: WILLIAMS, J. KIRBY REV
Address: 6550 NE 21ST DR
City-St-Zip: FT LAUDERDALE, FL 33308

Title: D ( ) Delete
Name: LAMERSON, SAM DR
Address: 648 SW 4TH AVE
City-St-Zip: BOYNTON BEACH, FL 33421

Title: D ( ) Delete
Name: BEAUPIED, GREG REV
Address: 5811 NE 20TH AVE
City-St-Zip: FT LAUDERDALE, FL 33308

Title: D ( ) Delete
Name: GAHAGEN, DON REV
Address: 111 S SEMINOLE ST
City-St-Zip: PORT ST JOE, FL 32456

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: JOHN KIRBY WILLIAMS MR. 04/14/2009

Electronic Signature of Signing Officer or Director — Date