2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002518

Entity Name: ANOINTED WORDS & MUSIC, INC.

FILED Apr 02, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

36636 BARRINGTON DR. EUSTIS, FL 32736 US

Current Mailing Address: New Mailing Address:

36636 BARRINGTON DR. EUSTIS, FL 32736

FEI Number: 20-0756221 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

MORRIS, RIPTON P 5224 STÁTE ROAD 46 SUITE 243 SANFORD, FL 32771 US MORRIS, RIPTON P 36636 BARRINGTON DRIVE EUSTIS, FL 32736

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: RIPTON P MORRIS 04/02/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete MORRIS, RIPTON P Name: 5224 STATE ROAD 46 #243 Address: City-St-Zip: SANFORD, FL 32771 US

Title: () Delete Name: MORRIS, ROSE M Address: 5224 STATE ROAD 46 #243 City-St-Zip: SANFORD, FL 32771 US

Title: () Delete MORRIS, TRICIA-ANNE Y Name: Address: 5224 STATE ROAD 46 #243 City-St-Zip: SANFORD, FL 32771 US

(X) Change () Addition MORRIS, RIPTON P Name: Address: 36636 BARRINGTON DRIVE

City-St-Zip: EUSTIS, FL 32736 US

(X) Change () Addition Title:

Name: MORRIS, ROSE M

Address: 36636 BARRINGTON DRIVE City-St-Zip: EUSTIS, FL 32736 US

Title: (X) Change () Addition Name: MORRIS, TRICIA-ANNE Y 36636 BARRINGTON DRIVE Address: City-St-Zip: EUSTIS, FL 32736 US

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: RIPTON P MORRIS Ρ 04/02/2009