

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005217

FILED
Apr 24, 2006
Secretary of State

Entity Name: ANOINTING FAITH FREE TABERNACLE OF PRAYER, INC.

Current Principal Place of Business:

6330 NW 26TH STREET
SUNRISE, FL 33313

New Principal Place of Business:

Current Mailing Address:

6330 NW 26TH STREET
SUNRISE, FL 33313

New Mailing Address:

8423 NW 61 STREET
TAMARAC, FL 33313

FEI Number: 54-2142972

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

THURMAN, CARMEN M
6330 NW 26TH STREET
SUNRISE, FL 33313 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: THURMAN, CARMEN M
Address: 6330 NW 26TH STREET
City-St-Zip: SUNRISE, FL 33313

Title: D () Delete
Name: ROBINSON, KERLINE
Address: 8423 NW 61ST STREET
City-St-Zip: TAMARAC, FL 33321

Title: D () Delete
Name: THURMAN, EDDIE
Address: 6330 NW 26TH STREET
City-St-Zip: SUNRISE, FL 33313

Title: D () Delete
Name: ROBINSON, BRIAN
Address: 8423 NW 61ST STREET
City-St-Zip: TAMARAC, FL 33321

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 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: KERLINE ROBINSON

D

04/24/2006

Electronic Signature of Signing Officer or Director

Date