

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jan 29, 2009
Secretary of State

DOCUMENT# N04000009786

Entity Name: ANOINTED WORKS MINISTRIES, INC.**Current Principal Place of Business:**315 N. MAIN ST.
WILDWOOD, FL 34785**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 663
FRUITLAND PARK, FL 34731**New Mailing Address:****FEI Number:** 55-0885041**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**WHITE, MATTHEW E
604 OLD DIXIE AVE
FRUITLAND PARK, FL 34731 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:** PD () Delete
Name: WHITE, MATTHEW E
Address: 604 OLD DIXIE AVE
City-St-Zip: FRUITLAND PARK, FL 34731**Title:** VD () Delete
Name: GUGLE, KATHLEEN D
Address: 606 OLD DIXIE AVE
City-St-Zip: FRUITLAND PARK, FL 34731**Title:** TSD () Delete
Name: WHITE, LEANNE E
Address: 604 OLD DIXIE AVE
City-St-Zip: FRUITLAND PARK, FL 34731**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PSD (X) Change () Addition
Name: WHITE, MATTHEW E
Address: 604 OLD DIXIE AVE
City-St-Zip: FRUITLAND PARK, FL 34731**Title:** VTD (X) Change () Addition
Name: LEANNE, WHITE E
Address: 604 OLD DIXIE AVE
City-St-Zip: FRUITLAND PARK, FL 34731**Title:** D (X) Change () Addition
Name: MONTGOMERY, KIMBURLEIGH J
Address: 1208 PINE RIDGE DAIRY RD
City-St-Zip: FRUITLAND PARK, FL 34731**Title:** D () Change (X) Addition
Name: GUGLE, KATHLEEN D
Address: 606 OLD DIXIE AVE
City-St-Zip: FRUITLAND PARK, FL 34731

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: MATTHEW E. WHITE

PD

01/29/2009

Electronic Signature of Signing Officer or Director

Date