

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2008 08:00 AM
Secretary of State

DOCUMENT # N05000003561

1. Entity Name
FRESH ANOINTING HOUSE OF WORSHIP, ORLANDO, INC.



Principal Place of Business
**3329 COUNTRYSIDE VIEW DRIVE
SAINT CLOUD, FL 34772**

Mailing Address
**3329 COUNTRYSIDE VIEW DRIVE
SAINT CLOUD, FL 34772**



01282008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
73-1674477

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**AIKENS, TERRY SR.
3329 COUNTRYSIDE VIEW DRIVE
SAINT CLOUD, FL 34772**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

01/28/2008

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**U00000809440
02/08/08-80021-022 70.00**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	AIKENS, TERRY SR.
STREET ADDRESS	3329 COUNTRYSIDE VIEW DRIVE
CITY-ST-ZIP	SAINT CLOUD, FL 34772
TITLE	PAST
NAME	AIKENS, ANN CO-PAST
STREET ADDRESS	3329 COUNTRYSIDE VIEW DRIVE
CITY-ST-ZIP	SAINT CLOUD, FL 34772
TITLE	D
NAME	STEELE, ANTHONY
STREET ADDRESS	12427 BLACKSMITH DRIVE APT. 102
CITY-ST-ZIP	ORLANDO, FL 32837
TITLE	D
NAME	HAYES, ROLAND
STREET ADDRESS	3346 CEDAR HAMMOCK TRAIL
CITY-ST-ZIP	SAINT CLOUD, FL 34769

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other the empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/28/2008

DATE

407.362.1782

DAYTIME PHONE #