

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008166

FILED
Feb 10, 2008
Secretary of State

Entity Name: THE ANOINTED CHIP OF THE CORNER STONE MINISTRY, INC.

Current Principal Place of Business:

1809 JOG RD
#207
WEST PALM BEACH, FL 33411 US

New Principal Place of Business:

Current Mailing Address:

1809 JOG RD
#207
WEST PALM BEACH, FL 33411 US

New Mailing Address:

FEI Number: 20-5313373 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DAVIS, EMILY PASTOR
1809 JOG RD
#207
WEST PALM BEACH, FL 33411 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: P () Delete
Name: DAVIS, EMILY
Address: 1809 JOG RD #207
City-St-Zip: WEST PALM BEACH, FL 33411 US

Title: SEC () Delete
Name: SHELTON, SANDRA
Address: 1809 JOG RD #207
City-St-Zip: WEST PALM BEACH, FL 33411 US

Title: TREA () Delete
Name: PARSON, TRISTAN
Address: 1809 JOG RD #207
City-St-Zip: WEST PALM BEACH, FL 33411 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

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: VP () Change (X) Addition
Name: TURNER, SHARIAN M
Address: 483 GLENWOOD DR
City-St-Zip: WEST PALM BEACH, FL 33415

Title: TREA () Change (X) Addition
Name: ASHE, LUANNA
Address: CROOKSTICK RD
City-St-Zip: GREENACRES, FL

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: PASTOR EMILY DAVIS

PRES

02/10/2008

Electronic Signature of Signing Officer or Director

Date