

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06507

FILED  
Apr 22, 2010  
Secretary of State

**Entity Name:** NEW ANOINTING INTERNATIONAL MINISTRIES, INC.

**Current Principal Place of Business:**

9833 SIBBALD ROAD  
JACKSONVILLE, FL 32208

**New Principal Place of Business:**

**Current Mailing Address:**

9833 SIBBALD ROAD  
JACKSONVILLE, FL 32208

**New Mailing Address:**

FEI Number: 52-1374947

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

WADE, ARTHUR E. REV.  
838 TAMMY COVE LANE  
JACKSONVILLE, FL 32218 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  
Name: WADE, ARTHUR E.  
Address: 838 TAMMY COVE LANE  
City-St-Zip: JACKSONVILLE, FL

Title: VP  
Name: WADE, PAULINE W.  
Address: 838 TAMMY COVE LANE  
City-St-Zip: JACKSONVILLE, FL 32218

Title: S  
Name: WADE, KAREN  
Address: 11766 CHESTNUT OAK DRIVE E.  
City-St-Zip: JACKSONVILLE, FL 32218

Title: T  
Name: CRUSAW, BETTY  
Address: 3117 TROUT RIVER BLVD  
City-St-Zip: JACKSONVILLE, FL 32208

Title: T  
Name: GRAHAM, SHIRLEY  
Address: 4725 PLAYSCGOOL DRIVE  
City-St-Zip: JACKSONVILLE, FL 32210

Title: T  
Name: MOTE, FRANCES  
Address: 3147 MARYLAND ST.  
City-St-Zip: JACKSONVILLE, FL 32209

I hereby 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 all other like empowered.

SIGNATURE: KAREN WADE

S

04/22/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date