

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005921

FILED
Aug 05, 2009
Secretary of State

Entity Name: TREASURE ANOINTING MINISTRIES INC.

Current Principal Place of Business:

3236 BODMIN MOOR DRIVE
TALLAHASSEE, FL 32317

New Principal Place of Business:

Current Mailing Address:

3236 BODMIN MOOR DRIVE
TALLAHASSEE, FL 32317

New Mailing Address:

POST OFFICE BOX 12396
TALLAHASSEE, FL 32317

FEI Number: 26-1162491 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

COBARRIS, GINA
3300 WEST SOUTH STREET
ORLANDO, FL 32805 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: CALHOUN, BIANCA S
Address: 3236 BODMIN MOOR DRIVE
City-St-Zip: TALLAHASSEE, FL 32317

Title: CHRM () Delete
Name: WOODARD, JOE
Address: 2876 NORTH JULIET DRIVE
City-St-Zip: DELTONA, FL 32738

Title: VP () Delete
Name: COBARRIS, GINA
Address: 3300 WEST SOUTH STREET
City-St-Zip: ORLANDO, FL 32805

Title: D (X) Delete
Name: CALHOUN, CALVIN
Address: 3236 BODMIN MOOR DRIVE
City-St-Zip: TALLAHASSEE, FL 32317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: CALHOUN, BIANCA S
Address: 3236 BODMIN MOOR DRIVE
City-St-Zip: TALLAHASSEE, FL 32317

Title: VC (X) Change () Addition
Name: COBARRIS, GINA
Address: 3300 WEST SOUTH STREET
City-St-Zip: ORLANDO, FL 32805

Title: D (X) Change () Addition
Name: CALHOUN JR, CALVIN W
Address: 3236 BODMIN MOOR DRIVE
City-St-Zip: TALLAHASSEE, FL 32317

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BIANCA SIMMONDS CALHOUN

C

08/05/2009

Electronic Signature of Signing Officer or Director

Date