2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000012286

Entity Name: ANOINTED ONES MINISTRY INC.

FILED May 29, 2009 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
1515 WEST 5TH ST SANDFORD, FL 32771			
Current Mailing Address:		New Mailing Address:	
1515 WEST SANDFORE	5TH ST D, FL 32771		
	e with s. 607.193(2)(b), F.S., the corporation did not receive t	-).
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:			
BLOUNT, WILLIE 7302 LOGAN HEIGHTS CIR SANDFORD, FL 32771 US		BLOUNT, WILLIE F 7302 LOGAN HEIGHTS CIR SANDFORD, FL 32771 US	
The above r in the State	named entity submits this statement for the purpose of Florida.	f changing it	s registered office or registered agent, or both,
SIGNATURE: PASTOR WILLIE BLOUNT			05/29/2009
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CP () Delete BLOUNT, WILLIE F 1515 WEST 5TH ST SANDFORD, FL 32771	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	SP () Delete BLOUNT, PATRICIA 1515 WEST 5TH ST SANDFORD, FL 32771	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () Delete BATES, SYLVIA Z 4262 LAKE RICHMOND DR ORLANDO, FL 32811	Title: Name: Address: City-St-Zip:	JP (X) Change () Addition HICKMON, SABRINA 1018 PINE AVE SANFORD, FL 32771
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	B () Change (X) Addition SEARCY, ANTHONY 1625 MERCY DRIVE APT #32 ORLANDO, FL 32808
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	B () Change (X) Addition PEREZ, SANDRA 5102 LOGAN HEIGHTS CIR SANFORD, FL 32773
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	B () Change (X) Addition SEARCY, ANTOINTTE 1625 MERCY DRIVE APT # 32 ORLANDO, FL 32808

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 WILLIE BLOUNT P 05/29/2009