

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000001355

FILED
May 01, 2010
Secretary of State

Entity Name: ANOINTED WORD KINGDOM ASSEMBLIES, INC.

Current Principal Place of Business:

4057 GALLAGHER LOOP
#101
CASSELBERRY, FL 32707

New Principal Place of Business:

Current Mailing Address:

4057 GALLAGHER LOOP
#101
CASSELBERRY, FL 32707

New Mailing Address:

FEI Number: 80-0347929 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

Name and Address of New Registered Agent:

BURNS, ANTHONY D SR
4057 GALLAGHER LOOP
#101
CASSELBERRY, FL 32707 US

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: BURNS, ANTHONY D SR
Address: 4057 GALLAGHER LOOP
City-St-Zip: CASSELBERRY, FL 32707

Title: VP
Name: BURNS, BETTIE
Address: 4057 GALLAGHER LOOP
City-St-Zip: CASSELBERRY, FL 32707

Title: TRES
Name: LEVY, CALVIN
Address: POST OFFICE BOX 46115
City-St-Zip: TAMPA, FL 33467

Title: BM
Name: NEWTON, PATREZA
Address: 1410 NIEUPORT LN
City-St-Zip: ORLANDO, FL 32805

Title: BM
Name: THOMPSON, VIVIAN D
Address: 3900 5TH AVE NORTH
City-St-Zip: ST PETERSBURG, FL 33733

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: ANTHONY BURNS

PRES

05/01/2010

Electronic Signature of Signing Officer or Director

Date