

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 11, 2002 8:00 am
Secretary of State

09-11-2002 90062 004 ****61.25

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1. Entity Name

ANOINTED REACHOUT MINISTRIES INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

504 S DIXIE HWY
 #3
 POMPANO BEACH FL 33060
 US

P.O. BOX 993
 DEERFIELD BEACH FL 33443

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MADISON, LONNIE B SR
170 SW 2ND ST
DEERFIELD FL 33441

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

After September 13, 2002,
min. will be \$236.25.

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
 NAME MADISON, LONNIE B SR
 STREET ADDRESS 170 SW 2ND ST
 CITY-ST-ZIP DEERFIELD FL 33441

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE VP D ☐ Delete
 NAME MADISON, JUANITA
 STREET ADDRESS 170 SW 2ND ST
 CITY-ST-ZIP DEERFIELD FL 33441

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D ☒ Delete
 NAME GLENN, JERRY
 STREET ADDRESS 233 SW 1ST TERRACE
 CITY-ST-ZIP DEERFIELD FL 33441

TITLE ☒ Change ☐ Addition
 NAME Pera Youngins
 STREET ADDRESS 232 SW 1st Street
 CITY-ST-ZIP Deerfield Beach, FL 33441

TITLE SD ☐ Delete
 NAME LUCAS, SHELIA
 STREET ADDRESS 1220 SW 5TH AVE
 CITY-ST-ZIP DEERFIELD FL 33441

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D ☐ Delete
 NAME JORDAN, MARY
 STREET ADDRESS 710 SW 14TH COURT
 CITY-ST-ZIP DEERFIELD FL

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Lonnie B. Madison **Lonnie B. Madison** Sept 10, 2002 (954) 733-5725

CR2E037 (4/02)