

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003066

FILED  
May 01, 2007  
Secretary of State

**Entity Name:** ANOINTED REACHOUT MINISTRIES INTERNATIONAL, INC.

**Current Principal Place of Business:**

504 S DIXIE HWY  
#3  
POMPAN0 BEACH, FL 33060 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 993  
DEERFIELD BEACH, FL 33443

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:**

MADISON, LONNIE B SR  
170 SW 2ND ST  
DEERFIELD, FL 33441 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: PD ( ) Delete  
Name: MADISON, LONNIE B SR  
Address: 3721 NW 28TH CT.  
City-St-Zip: LAUDERDALE LAKES, FL 33311

Title: VP D ( ) Delete  
Name: MADISON, JUANITA  
Address: 3721 NW 28TH CT.  
City-St-Zip: LAUDERDALE LAKES, FL 33311

Title: D ( ) Delete  
Name: YOUMANS, VERA  
Address: 232 SW 1ST STREET  
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: SD ( ) Delete  
Name: LUCAS, SHELIA  
Address: 1220 SW 5TH AVE  
City-St-Zip: DEERFIELD, FL 33441

Title: ASD ( ) Delete  
Name: STANLEY, CHARLENE  
Address: 279 NE 41 CT.  
City-St-Zip: POMPAN0 BEACH, FL 33064

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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: LONNIE B MADISON SR

LMB

05/01/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date