## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N94000005445

Entity Name: ANCHORPOINT MINISTRIES, INC.

Apr 29, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1965 SW 3RD STREET OKEECHOBEE, FL 349743977

**Current Mailing Address: New Mailing Address:** 

1965 SW 3RD STREET OKEECHOBEE, FL 349743977

FEI Number: 65-0538507 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WATERS, JAMES WATERS, JAMES 355 BENT OAK 1965 SW 3RD STREET US

ROYAL PALM BEACH, FL 33411 OKEECHOBEE, FL 349743977 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: 04/29/2004

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

( ) Delete DP (X) Change ( ) Addition WATERS, JAMES WATERS, JAMES Name: Name: 355 BENT OAK Address: 1965 SW 3RD STREET Address:

City-St-Zip: ROYAL PALM BEACH, FL City-St-Zip: OKEECHOBEE, FL 349743977

Title: DST Title: DST (X) Change ( ) Addition ( ) Delete Name: WATERS, ELAINE Name: WATERS, ELAINE Address: 355 BENT OAK Address: 1965 SW 3RD STREET

City-St-Zip: ROYAL PALM BEACH, FL City-St-Zip: OKEECHOBEE, FL 349743977

Title: () Delete Title: (X) Change ( ) Addition JENNINGS, DEBORAH Name: JENNINGS, DEBORAH Name:

Address: 355 BENT OAK Address: 8644 FOLEY DR City-St-Zip: ROYAL PALM BEACH, FL 33411 City-St-Zip: ORLANDO, FL 32825

Title: DV ( ) Delete Title: () Change () Addition

Name: LONG, BRYANT Name: Address: 1811 LINDSEY COURT Address: City-St-Zip: WEST PALM BEACH, FL 33414 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ELAINE WATERS DST 04/29/2004