2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2009
Secretary of State

DOCUMENT# N97000001713

Entity Name: REDEEMING FAITH & ANOINTING MINISTRIES, INCORPORATED

Current Principal Place of Business:

918 SE WILLISTON RD
GAINESVILLE, FL 32601

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6043
GAINESVILLE, FL 326276043

New Mailing Address:

FEI Number: 59-3431578 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OSOBA, TERESA
6118 SW 63RD LANE
GAINESVILLE, FL 32608 US

Name and Address of New Registered Agent:

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:	D	( ) Delete
Name:	OSOBA, BABAJIDE	
Address:	6118 SW 63RD LANE	
City-St-Zip:	GAINESVILLE, FL 32608	
Title:	D	( ) Delete
Name:	WATTS, KENNETH	
Address:	345 CROTON DRIVE	
City-St-Zip:	MAITLAND, FL 32751	
Title:	D	( ) Delete
Name:	OSOBA, TERESA	
Address:	6118 SW 63RD LANE	
City-St-Zip:	GAINESVILLE, FL 32608	
Title:	D	( ) Delete
Name:	COLLINS, JENAI	
Address:	620 SW 4TH STREET	
City-St-Zip:	GAINESVILLE, FL 32601	
Title:	DT	( ) Delete
Name:	POLKE, CLARENCE	
Address:	103 SOUTH FRANKLIN AVENUE	
City-St-Zip:	ARCHER, FL 32618	

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: TERESA OSOBA D 04/14/2009

Electronic Signature of Signing Officer or Director — Date