

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004286

FILED
Jan 08, 2007
Secretary of State

Entity Name: ANOINTED RIVERS MINISTRIES, INC.

Current Principal Place of Business:

12754 LAKE VISTA DR.
GIBSONTON, FL 335343922 US

New Principal Place of Business:

Current Mailing Address:

12754 LAKE VISTA DR.
GIBSONTON, FL 335343922 US

New Mailing Address:

FEI Number: 65-0779392

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BENDER, BRUCE J
12754 LAKE VISTA DR.
GIBSONTON, FL 335343922 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: BROMUND, ROBERT J
Address: 6321 LILAC PLACE
City-St-Zip: SARASOTA, FL 34231 US

Title: D () Delete
Name: CLARK, CHARLES W
Address: P O BOX 214
City-St-Zip: STOCKERTOWN, PA 18083 US

Title: D () Delete
Name: FEHNEL, ANNIE
Address: 625 ABEL COLCONY RD.
City-St-Zip: WIND GAP, PA 18091 US

Title: P () Delete
Name: BENDER, BRUCE J
Address: 12754 LAKE VISTA DR.
City-St-Zip: GIBSONTON, FL 335343922 US

Title: V () Delete
Name: BENDER, MARGARET L
Address: 12754 LAKE VISTA DR.
City-St-Zip: GIBSONTON, FL 335343922 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BROMUND, ROBERT J
Address: 42 WEST OAK ST., LOT F3
City-St-Zip: OSPREY, FL 34229 US

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 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: BRUCE J BENDER

PRES

01/08/2007

Electronic Signature of Signing Officer or Director

Date