FILED
May 02, 2002 8:00 am
Secretary of State

05-02-2002 90059 037 ****61.25

NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000001478

1. Entity Name: Anchor Ministries, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
101 N. Riverside Dr.	101 N. Riverside Dr.
Suite, Apt. #, etc.: Ste 209W	Suite, Apt. #, etc.: Ste 209W
City & State: Pompano Beach FL	City & State: Pompano Beach FL
Zip: 33062 Country: USA	Zip: 33062 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-0820876 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Cris Castles

Street Address (P.O. Box Number is Not Acceptable): 101 N. Riverside Dr. Ste 209W

City: Pompano Beach FL Zip Code: 33062

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.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FEE IS $61.25
Initial or Amended UBR

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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
DP	Cris Castles	101 N. Riverside Dr, Ste 209W	Pompano Beach, FL 33062
DTS	Brett Barnes	5330 NE 16 Ave	Ft. Lauderdale, FL 33334
D	Pike Castles	2100 S. Ocean Lane #812	Ft. Lauderdale, FL 33316
D	Norris Misemer	3119 E McKinney 3	Denton, TX 76208
D	David Grimm	1830 NW 33 Ct	Oakland Park, FL 33309
D	Daniel Morales	200 NW 18 St.	Pompano Beach, FL 33060

DO NOT WRITE IN THIS SPACE

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Cris Castles — 4/22/02 — (954) 941-8520

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037B (12/01)

Attachment# N98000001478 /1646314

10. continued

D

Thomas Spear
112 NE 10 Ave
Pompano Beach, FL 33060