

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED
Sep 18 1997 8:00am
Secretary of State

| | | |
|---|---|---|
| PROFIT CORPORATION ANNUAL REPORT 1997 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
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DOCUMENT # **P96000037505 (0)**

1. Corporation Name

ANCHOR MINISTRIES, INC.

Principal Place of Business

**2516 SHADY OAK COURT
PANAMA CITY FL 32408**

Mailing Address

**2516 SHADY OAK COURT
PANAMA CITY FL 32408**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **04/30/1996** 3a. Date of Last Report

4. FEI Number **59-3332967** Applied For ☐ Not Applicable ☐

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

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 Highway 20 East
Suite, Apt. #, etc.

22
City & State

23 Hosford, FL
Zip Country

24 32234

2a. Mailing Address

26 Highway 20 East
Suite, Apt. #, etc.

27
City & State

28 Hosford, FL
Zip Country

29 32234

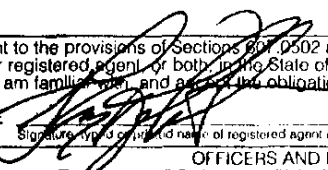
9. Name and Address of Current Registered Agent

**LEWIS, RHONDA
2516 SHADY OAK COURT
PANAMA CITY FL 32408**

10. Name and Address of New Registered Agent

81 Name
George Roberts
82 Street Address (P.O. Box Number is Not Acceptable)
Highway 20 East
83
84 City Hosford, FL 85 Zip Code 32234

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE  (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE **Registered Agent** ☒ DELETE
NAME **Rhonda Lewis**
STREET ADDRESS **2516 Shady Oak Court**
CITY-ST-ZIP **Panama City, FL 32408**

TITLE **President** ☐ DELETE
NAME **George Roberts**
STREET ADDRESS **Highway 20 East Hosford, FL 32234**
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if the report is on an attachment with an address.

SIGNATURE 

CR2E034 (4/97)