

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000348

Entity Name: THE ANAWIM INC.**Current Principal Place of Business:**10016 N. FULTON CT.
ORLANDO, FL 32836**Current Mailing Address:**P.O. BOX 365
WINDERMERE, FL 34786**FEI Number:** 26-1645158**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GONZALES, PATRICK P MD
10016 N. FULTON CT.
ORLANDO, FL 32836 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	D
Name	GONZALES, LIZA C
Address	10016 N. FULTON CT.
City-State-Zip:	ORLANDO FL 32836

Title	D
Name	MARQUINEZ, FRANK D
Address	3080 ZAHARIAS DRIVE
City-State-Zip:	ORLANDO FL 32837

Title	D
Name	MARUT, TESS
Address	443 ALSTON DRIVE
City-State-Zip:	ORLANDO FL 32835

Title	D
Name	GARCIA, TITO
Address	6830 SUGARBUSH DRIVE
City-State-Zip:	ORLANDO FL 32819

Title	DIRECTOR
Name	LEWIS, WHITEFORD
Address	8224 VIA BELLA NOTTE
City-State-Zip:	ORLANDO FL 32836

Title	DIRECTOR, SECRETARY
Name	PINUELA, JANICE
Address	1126 LAKE LEGRO CT.
City-State-Zip:	ORLANDO FL 32835

I hereby 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 all other like empowered.

SIGNATURE: FRANK MARQUINEZ**DIRECTOR****01/25/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date