2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703957

FILED Apr 13, 2009 Secretary of State

Entity Name: EMMAUS BAPTIST COLLEGE, INC.

Current F	Principal Place	of Business:	New Principa	l Place of Business:	
	BLOOM RD N, FL 33511				
Current Mailing Address:			New Mailing	New Mailing Address:	
P.O. BOX BRANDO	. 2758 N, FL 33509				
FEI Numbei	r: 23-7202810	FEI Number Applied For ()	FEI Number Not Applicab	le () Certificate of Status Desired (X)	
Name and	d Address of C	Current Registered Agent:	Name and Ad	dress of New Registered Agent:	
706 DEW BRANDO		US			
	e named entity : te of Florida.	submits this statement for the p	urpose of changing its re	egistered office or registered agent, or both,	
SIGNATU					
	Electror	nic Signature of Registered Age	ent	Date	
OFFICER	S AND DIREC	TORS:	ADDITIONS/C	HANGES TO OFFICERS AND DIRECTOR	
√ame: Address:	MCALISTER, R 706 DEW BLC	OM RD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Name: Address: City-St-Zip: Title: Name: Address:	MCALISTER, R 706 DEW BLC BRANDON, FL VP BROWN, EDW 4400 BURKLEY	AYMOND DR. IOM RD. 33511 Delete ARD K DR. (ROAD	Name: Address: City-St-Zip: Title: TE Name: PR Address: 40		
Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	MCALISTER, R 706 DEW BLC BRANDON, FL VP BROWN, EDW 4400 BURKLE AUBURNDALE, S/TE JACKSON, MAI 504 S. OAKWO	AYMOND DR. IOM RD. IOM	Name: Address: City-St-Zip: Title: TE Name: PF Address: 40 City-St-Zip: AL Title: S/ Name: JA Address: 91	(X) Change()Addition RICE, DAVID 6 MAIN STREET BURNDALE, FL 33823	
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Address: City-St-Zip: City-St-Zip: City-St-Zip:	MCALISTER, R 706 DEW BLC BRANDON, FL VP BROWN, EDW 4400 BURKLE AUBURNDALE, S/TE JACKSON, MAI 504 S. OAKWO BRANDON, FL	AYMOND DR. OM RD. 33511 Delete ARD K DR. (ROAD FL 33823 Delete RVIN DOD AVE. 33511 Delete 3 OND STREET	Name: Address: City-St-Zip: Title: TE Name: PF Address: 40 City-St-Zip: AL Title: S/ Name: JA Address: 91	(X) Change () Addition RICE, DAVID 6 MAIN STREET BURNDALE, FL 33823 TE (X) Change () Addition CKSON, MARVIN 6 W. SPRING ST.	
Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Address: Address:	MCALISTER, R 706 DEW BLC BRANDON, FL VP BROWN, EDW 4400 BURKLE AUBURNDALE, S/TE JACKSON, MAI 504 S. OAKWO BRANDON, FL TE GALLUPS, BOI 1310 NE SEC MULBERRY, FI	AYMOND DR. IOM RD. IOM	Name: Address: City-St-Zip: Title: TE Name: PF Address: 40 City-St-Zip: AU Title: S/ Name: JA Address: 91 City-St-Zip: MC Title: Name: Address:	(X) Change () Addition RICE, DAVID 6 MAIN STREET IBURNDALE, FL 33823 FE (X) Change () Addition CKSON, MARVIN 6 W. SPRING ST. DUNT VERNON, GA 30445	

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: RAYMOND MCALISTER P 04/13/2009