2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2004 08:00 AM
Secretary of State

DOCUMENT # 727759

1. Entity Name
THE GREATER EMMANUEL HOLINESS APOSTOLIC FAITH CHURCH OF ESCAMBIA COUNTY FLORIDA, INC.

Principal Place of Business	Mailing Address
3420 W JOHN ST PENSACOLA, FL 32505	3420 W JOHN ST PENSACOLA, FL 32505

DO NOT WRITE IN THIS SPACE

03252004 No Chg-NP CR2E037 (10/03)

4. FEI Number
59-1975008
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

DURANT TOMMIE L.
7821 TEMPLETON RD.
WARRINGTON, FL 32506

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Tommie L Durant 4-7-04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2004

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

U00000132529
04/27/04-80051-007 70.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	WALKER, JAMES
STREET ADDRESS	7880 HERRINGTON DRIVE
CITY-ST-ZIP	PENSACOLA, FL 00000,
TITLE	P
NAME	DURANT, MINNIE L
STREET ADDRESS	1230 WEST LLOYD STREET
CITY-ST-ZIP	PENSACOLA, FL 00000,
TITLE	D
NAME	MCCASTLE, LOUISE
STREET ADDRESS	1238 LANCER DRIVE
CITY-ST-ZIP	PENSACOLA, FL 32534
TITLE	D
NAME	WALKER, SHIRLEY
STREET ADDRESS	7880 HERRINGTON DRIVE
CITY-ST-ZIP	PENSACOLA, FL
TITLE	V
NAME	DURANT, TOMMIE L
STREET ADDRESS	7821 TEMPLETON RD.
CITY-ST-ZIP	WARRINGTON, FL
TITLE	S
NAME	DURANT, CARRIE
STREET ADDRESS	7821 TEMPLETON RD.
CITY-ST-ZIP	PENSACOLA, FL

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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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Minnie L Durant 4-7-04 850-456-8761
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #