2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2007
Secretary of State

DOCUMENT# 727759

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

Current Principal Place of Business:

3420 W JOHN ST
PENSACOLA, FL 32505

New Principal Place of Business:

Current Mailing Address:

3420 W JOHN ST
PENSACOLA, FL 32505

New Mailing Address:

FEI Number: 59-1975008 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WALKER, SHIRLEY
7880 HERRINGTON DR
PENSACOLA, FL 32534 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: WALKER, JAMES,
Address: 7880 HERRINGTON DRIVE
City-St-Zip: PENSACOLA, FL 00000,

Title: D ( ) Delete
Name: MCCASTLE, LOUISE
Address: 1238 LANCER DRIVE
City-St-Zip: PENSACOLA, FL 32534

Title: D ( ) Delete
Name: WALKER, SHIRLEY
Address: 7880 HERRINGTON DRIVE
City-St-Zip: PENSACOLA, FL

Title: V ( ) Delete
Name: DURANT, TOMMIE L,
Address: 7821 TEMPLETON RD.
City-St-Zip: WARRINGTON, FL

Title: S ( ) Delete
Name: DURANT, CARRIE,
Address: 7821 TEMPLETON RD.
City-St-Zip: PENSACOLA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: FIELDS, EVELYN
Address: 461 RONDA ST
City-St-Zip: PENSACOLA, FL 32514

Title: P (X) Change ( ) Addition
Name: DURANT, TOMMIE L,
Address: 7821 TEMPLETON RD.
City-St-Zip: PENSACOLA, FL 32506

Title: S (X) Change ( ) Addition
Name: DURANT, CARRIE,
Address: 7821 TEMPLETON RD.
City-St-Zip: PENSACOLA, FL 32506

I hereby certify that the information supplied with this filing does not qualify for the 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: CARRIE DURANT S 04/02/2007

Electronic Signature of Signing Officer or Director — Date