

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2007 8:00 am
Secretary of State

02-12-2007 90089 044 ****70.00

DOCUMENT # N10946

1. Entity Name
EMMANUEL BAPTIST CHURCH, INC.



Principal Place of Business
**5391 JOHNSON RD
COCONUT CREEK, FL 33097**

Mailing Address
**PO BOX 970550
COCONUT, FL 33097**

40014381



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01312007 Chg-NP CR2E037 (12/06)

City & State

City & State
COCONUT CREEK, FL

4. FEI Number
59-2614428

Applied For
Not Applicable

Zip
33073

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LEON, CARMAN J. JR. ESQ
411 E HILLSBORO BLVD.
DEERFIELD BEACH, FL 33441**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete
NAME **BARKER, CHARLES**
STREET ADDRESS **130 NE 19TH STREET**
CITY-ST-ZIP **POMPAHO BEACH, FL**

TITLE ☒ Change ☐ Addition
NAME **4281 NW 18th AVE.**
STREET ADDRESS **DEERFIELD BEACH, FL 33064**
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **FISHER, ROBERT**
STREET ADDRESS **588 NW 45TH AVE**
CITY-ST-ZIP **DEERFIELD BEACH, FL 33442**

TITLE ☒ Change ☐ Addition
NAME **5391 JOHNSON ROAD**
STREET ADDRESS **COCONUT CREEK, FL 33073**
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **DIEKEMA, ROBERT**
STREET ADDRESS **261 SW 32 AVE**
CITY-ST-ZIP **DEERFIELD BCH, FL**

TITLE ☒ Change ☐ Addition
NAME **5391 JOHNSON ROAD**
STREET ADDRESS **COCONUT CREEK, FL 33073**
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **NEUMAN, JERRY**
STREET ADDRESS **2541 NE 8TH TERRACE**
CITY-ST-ZIP **POMPAHO BEACH, FL**

TITLE ☒ Change ☐ Addition
NAME **5391 JOHNSON ROAD**
STREET ADDRESS **COCONUT CREEK, FL 33073**
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **HERRICK, TOM**
STREET ADDRESS **3470 SW 4TH ST**
CITY-ST-ZIP **DEERFIELD BCH, FL 33442**

TITLE ☒ Change ☐ Addition
NAME **5391 JOHNSON ROAD**
STREET ADDRESS **COCONUT CREEK, FL 33073**
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **MCDANIEL, ROBERT**
STREET ADDRESS **4179 NW 7TH PLACE**
CITY-ST-ZIP **DEERFIELD BEACH, FL 33442**

TITLE ☒ Change ☐ Addition
NAME **5391 JOHNSON ROAD**
STREET ADDRESS **COCONUT CREEK, FL 33073**
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Tom Herrick 1/31/07