

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000000565

**Entity Name:** EMMANUEL COLLEGE OF THE NATIONS, INC.**Current Principal Place of Business:**19821 NW 2ND AVE #356  
MIAMI GARDENS, FL 33169**Current Mailing Address:**19821 NW 2ND AVE #356  
MIAMI GARDENS, FL 33169**FEI Number:** 38-3928300**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GOLDEN, E. SCOTT  
644 SE 4TH AVE  
FORT LAUDERDALE, FL 33301 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	SECRETARY, DIRECTOR
Name	BONEY, CARMEN
Address	19821 NW 2ND AVE #356
City-State-Zip:	MIAMI GARDENS FL 33169

Title	DIRECTOR
Name	BURCK, JAMES
Address	19821 NW 2ND AVE, #356
City-State-Zip:	MIAMI GARDENS FL 33169

Title	TREASURER, DIRECTOR
Name	LEWIS, WINSTON
Address	19821 NW 2ND AVE #356
City-State-Zip:	MIAMI GARDENS FL 33169

  

Title	PRESIDENT
Name	BONEY, JOHN
Address	19821 NW 2ND AVENUE, #356
City-State-Zip:	MIAMI GARDENS FL 33169-3341

*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:** JOHN BONEY**PRESIDENT****04/23/2014**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date