

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N40693

**Entity Name:** EMMANUEL MINISTRIES INTERNATIONAL, INC.

**Current Principal Place of Business:**

644 SE 4TH AVENUE  
FORT LAUDERDALE, FL 33301

**Current Mailing Address:**

E. SCOTT GOLDEN, ESQ.  
644 SE 4TH AVENUE  
FORT LAUDERDALE, FL 33301

**FEI Number:** 65-0295620

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GOLDEN, E. SCOTT ESQ  
644 SE 4TH AVENUE  
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           | DP                  | Title           | DST            |
| Name            | BONEY, JOHN         | Name            | BONEY, CARMEN  |
| Address         | P.O BOX 694841      | Address         | P.O BOX 694841 |
| City-State-Zip: | MIAMI FL 33269      | City-State-Zip: | MIAMI FL 33269 |
|                 |                     |                 |                |
| Title           | D                   |                 |                |
| Name            | FLETCHER, CLAUDETTE |                 |                |
| Address         | P.O BOX 694841      |                 |                |
| City-State-Zip: | MIAMI FL 33269      |                 |                |

*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/DIRECTOR**

**02/12/2015**

Electronic Signature of Signing Officer/Director Detail

Date