

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720074

FILED
Mar 18, 2009
Secretary of State

Entity Name: EMANUEL TABERNACLE BAPTIST CHURCH OF SAFETY HARBOR, FLORIDA, INC.

Current Principal Place of Business:

585 - 9TH AVE. N
SAFETY HARBOR, FL 34695 US

New Principal Place of Business:

Current Mailing Address:

695 BOOTH ST
SAFETY HARBOR, FL 34695 US

New Mailing Address:

FEI Number: 05-0114700

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAMPIER, FRED C
695 BOOTH ST
SAFETY HARBOR, FL 34695 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: PD () Delete
Name: DAMPIER, FRED C
Address: 695 BOOTH STREET
City-St-Zip: SAFETY HARBOR, FL 34645

Title: T () Delete
Name: MCCOY, CURTIS,
Address: 3455 BUTLER STREET
City-St-Zip: SAFETY HARBOR, FL

Title: SD () Delete
Name: WILLIAMS, HELEN,
Address: 806 EAST GATE DRIVE
City-St-Zip: SAFETY HARBOR, FL

Title: VD () Delete
Name: MCCOY, CURTIS
Address: 704 BOOTH STREET
City-St-Zip: SAFETY HARBOR, FL 34695

Title: T () Delete
Name: DAMPIER, JESSIE
Address: 695 BOOTH STREET
City-St-Zip: SAFETY HARBOR, FL 34695

Title: AT () Delete
Name: EVANS, NANCY
Address: 15657 60TH STREET N
City-St-Zip: CLEARWATER, FL 33760

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change () Addition
Name: MCCOY, CURTIS,
Address: 3455 BUTLER STREET
City-St-Zip: SAFETY HARBOR, FL 34695

Title: SD (X) Change () Addition
Name: WILLIAMS, HELEN,
Address: 806 EAST GATE DRIVE
City-St-Zip: SAFETY HARBOR, FL 34695

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: HELEN WILLIAMS

SD

03/18/2009

Electronic Signature of Signing Officer or Director

Date