

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$165 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$395)

NONPROFIT
CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 724128 (4)

1. Corporation Name

EMMANUEL BAPTIST CHURCH OF GIBSONTON, INC.

Principal Place of Business

Mailing Address

12011 EAST BAY ROAD
P.O. BOX 355
GIBSONTON FL 33534

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P.O. BOX 355
GIBSONTON FL 33534

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
08/15/1972	02/07/1994
4. FEI Number	Applied For Not Applicable
59-2321059	
5. Certificate of Status Desired	☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	☐ \$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status	☒ FILING FEE IS \$61.25
8. This corporation has liability for intangible tax under s. 100.032, Florida Statutes	☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

25 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

DOTSON, RANDALL L
1121 KINGFISH PLACE
APOLLO BCH FL 33572

10. Name and Address of New Registered Agent

81 Name	J. D. Rahn
82 Street Address (P.O. Box Number is Not Acceptable)	12024 Bull Frog Creek Rd
83 City	Gibsonton
84 City	FL
85 Zip Code	33534

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

J. D. Rahn

(NOTE: Registered Agent signature required when reappointing)

June 23, 1995

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	DOTSON, RANDALL L
STREET ADDRESS	1121 KINGFISH PLACE
CITY - ST - ZIP	APOLLO BCH FL
TITLE	VD
NAME	SWEAT, MARGARET J.
STREET ADDRESS	10010 PENINSULAR DR.
CITY - ST - ZIP	GIBSONTON, FL 00000
TITLE	STD
NAME	QUEEN, WALTER
STREET ADDRESS	11009 FERN HILL DRIVE
CITY - ST - ZIP	RIVERVIEW FL 33569
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	PD	☒ Change ☐ Addition
12 NAME	J. D. Rahn	
13 STREET ADDRESS	12024 Bull Frog Creek Rd	
14 CITY - ST - ZIP	Gibsonton, Fl. 33534	
21 TITLE		☐ Change ☐ Addition
22 NAME		
23 STREET ADDRESS		
24 CITY - ST - ZIP		
31 TITLE		☐ Change ☐ Addition
32 NAME		
33 STREET ADDRESS		
34 CITY - ST - ZIP		
41 TITLE		☐ Change ☐ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY - ST - ZIP		
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY - ST - ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an Attachment with an address.

SIGNATURE: X

J. D. Rahn

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #