FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**



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

1996

DOCUMENT #
1. Corporation Name 724128

(4)

EMMANUEL BAPTIST CHURCH OF GIBSONTON, INC.

Principal Place of Business Mailing Address						4 ENDIN 18419 18811 BIRDI 118		// D!!	
12011 EAST BAY ROAD 12011 EAST BAY ROAD P.O. BOX 355 P.O. BOX 355 GIBSONTON FL 33534 GIBSONTON FL 33534)		_	Date incorporated or Qua	diffed	3a. Date of Last f	Benort
						08/15/1972		07/03/19	
2. Principal Pla	2a. Mailing Address	ng Address			4. FEI Number		A	Applied For	
21	AT	26				59-2321059			Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	27			5. Certificate of Status Desired S8.75 Additional Fee Required			
City & State		City & State	<u></u>			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees			
Zip	Country	Zıp	⊢ '		8	8. This corporation has liability for intangible tax under s. 199.032,			
24	9, Name and Address of Current Registered Agent					Florida Statutes Name and Address of N		Yes No	
	9, Name and Address of Currer	it Hegistered Agent		1 Name			sem negis	itered Agent	
RAHN, J	D			<u> </u>	GKA	CE REGISTER			
12024 BULL FROG CREEK RD			8			oddress (P.O. Box Number is Not Acceptable)			
	ON FL 33534		8		, , , , , ,			· · · · · · · · · · · · · · · · · · ·	
			-	4 City				BE 7in	Codo
•			ľ	City	RIVE	RVIEW			3569
or register	to the provisions of Sections 617.0502 ed agent, or both, in the State of Flor th, and accept the obligations of, Sect	da. Such change was authoria	ed by the co	e-named c rporation's	corporation	submits this statement for the	he purpose ie appointm	of changing its re nent as registered	egistered office agent. I am
SIGNATURE /			OFE Flugistered A	print signature	required when			4-28-96 DATE	
12.		D DIRECTORS	13.		⊤₽ ₽	ADDITIONS/CHANGES TO	O OFFICER		
TITLE	PD DAUN LD	DELETE	11 1111			CE REGISTER		Change	Addition
NAME	40004 BUILL EDOC OREEV DO			7		1 ALAFIA DR		•	
STREET ADDRESS	GIBSONTON FL 33534			D		ERVIEW, FL.	3356	4 0	
CITY-ST-ZIP TITL€				1.4 CITY - ST - ZIP		CREATEN, 12.		Change	Addition
NAME	SWEAT, MARGARET J	Посеси	2 2 NAM					onange	
STREET ADDRESS	10010 PENINSULAR DR			ET ADDRESS					
CITY-ST-ZIP	GIBSONTON FL			7-ST-ZIP					
TITLE	STD	DELETE	3 1 7171					Change	Addition
NAME	QUEEN, WALTER		3 2 NAM	E					_
STREET ADDRESS	11009 FERN HILL DRIVE		3 3 STRE	ET ADDRESS					
CITY-ST-ZIP	RIVERVIEW FL 33569		3.4 CITY	r-ST-ZIP					
TITLE		DELETE	4.1 TITL	Ţ.				☐ Change	Addition
NAME			4 2 NAN	1E					
STREET ADDRESS			4 3 STRE	ET ADDRESS					
CITY-ST-ZIP			4.4.0117	- ST - ZIP	ļ		 		
TITLE		DELETE	5 1 7mL	Ē		400001 -05/21/96	833	3 🗀 💆 😘 🖰	Addition Addition
NAME			5 2 NAM			-05/21/96	-01145	029	
STREET ADDRESS				ET ADDRESS		***81.25			
CITY-ST-ZIP		□ OCI € TE		-ST-ZIP	 			Chacas	Addition
TITLE		DELETE	6 1 TITL					Change	Addition
NAME CERCET ADDRESS			6 2 NAV					,	14.
STREET ADDRESS				ET ADDRESS				'	1 CM
CITY-ST-ZIP	y certify that the information supplied	with this filipp is valuntarily fur	6.4 CITY		polify for the	o overnotion stated in Section	n 110 07/2	IVIA Elorido Statut	00.16

I do nereby certify that the information supplied with this liting is voluntarily furnished and does not quality for the exemption stated in Section 119.07(3)(k). Florida Statutes. If under 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 eath; 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: Signature and typed on rinted name of sturing officer or director (State) 4-28-96 813-677-5164

Dayline Prove :