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Secretary of State

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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 724128

1. Corporation Name

EMMANUEL BAPTIST CHURCH OF GIBSONTON, INC.

Principal Place of Business

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

Mailing Address

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



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

08/15/1972

4. FEI Number

59-2321059

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

Trust Fund Contribution

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

REGISTER, GRACE
7801 ALAFIA DR.
RIVERVIEW FL 33569

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME REGISTER, GRACE
STREET ADDRESS 7801 ALAFIA DR.
CITY-ST-ZIP RIVERVIEW FL 33569

DELETE

1.1 TITLE

Change

Addition

TITLE VD
NAME SWEAT, MARGARET J
STREET ADDRESS 10010 PENINSULAR DR
CITY-ST-ZIP GIBSONTON FL

DELETE

2.1 TITLE

Change

Addition

TITLE SD
NAME QUEEN, WALTER
STREET ADDRESS 11009 FERN HILL DRIVE
CITY-ST-ZIP RIVERVIEW FL 33569

DELETE

3.1 TITLE

Change

Addition

TITLE TD
NAME BENNETT, FLOYD N.
STREET ADDRESS 220 VAN GOGH CIRCLE
CITY-ST-ZIP BRANDON FL 33511

DELETE

4.1 TITLE

Change

Addition

TITLE PD
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

5.1 TITLE

Change

Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

6.1 TITLE

Change

Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/14/99 (813) 689-2122

CR2E037 (1/98)