

**2006 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 29, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # 726385**

1. Entity Name  
**EMMANUEL HOUSE OF PRAYER, INC.**



Principal Place of Business  
**2820 NW 7TH COURT  
FT. LAUDERDALE, FL 33311-6303 US**

Mailing Address  
**3831 N.W. 5TH STREET  
FT. LAUDERDALE, FL 33311-6303**

**DO NOT WRITE IN THIS SPACE**



03232006 No Chg-NP CR2E037 (11/05)

4. FEI Number  
**59-1766033**

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**ENGLISH-POLICE, MARCIA A  
5655 NW 86 AVE  
CORAL SPRINGS, FL 33067**

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

**SIGNATURE**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**000000483143  
04/11/06-80104-023 70.00**

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ENGLISH, BISHOP L. 3831 N.W. 5TH ST. FT. LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ENGLISH-POLICE, MARCIA A 5655 NW 86 AVE CORAL SPRINGS, FL 33067
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SCOTT, ANGELA N 4740 NW 41ST COURT LAUDERDALE LAKES, FL 33319
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, GLADYS 3631 N.W. 3RD STREET FT. LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT MARTIN, SANDRA C 3645 NW 28 COURT LAUDERDALE LAKES, FL 33311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

**LERONY ENGLISH / L. English**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3/24/06 954-584-3268**

Date

Daytime Phone #