

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000681

FILED  
Apr 30, 2011  
Secretary of State

**Entity Name:** EMMANUEL CHILDRENS' MINISTRY, INC.

**Current Principal Place of Business:**

2755 68TH ST. S.W.  
NAPLES, FL 34105

**New Principal Place of Business:**

2755 68TH STREET SW  
NAPLES, FL 34105

**Current Mailing Address:**

2755 68TH ST. S.W.  
NAPLES, FL 34105

**New Mailing Address:**

2755 68TH STREET SW  
NAPLES, FL 34105

**FEI Number:** 59-3623962

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KREHLING, LINDA M  
2755 68TH ST. SW  
NAPLES, FL 34105 US

**Name and Address of New Registered Agent:**

KREHLING, LINDA M  
2755 68TH STREET SW  
NAPLES, FL 34105 US

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:

04/30/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: KREHLING, LINDA M  
Address: 2755 68TH STREET SW  
City-St-Zip: NAPLES, FL 34105

Title: V  
Name: MARSHALL, RANDAL W  
Address: 1985 PAR DRIVE  
City-St-Zip: NAPLES, FL 34120

Title: O  
Name: GABOUREL, LEE  
Address: 3290 BERMUDA ISLAND CIRCLE #415  
City-St-Zip: NAPLES, FL 34109

Title: O  
Name: BICE, WAYNE  
Address: PO BOX #8692  
City-St-Zip: NAPLES, FL 34101

Title: SEC  
Name: COONES, SHELRE  
Address: 6125 THRESHER DRIVE  
City-St-Zip: NAPLES, FL 34112

I hereby 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 all other like empowered.

SIGNATURE: LINDA M KREHLING

P

04/30/2011

Electronic Signature of Signing Officer or Director

Date