


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 04, 2008 8:00 am
Secretary of State


06-04-2008 90006 004 ****61.25

DOCUMENT # N00000005539	
1. Entity Name EMANUEL FREE WILL BAPTIST CHURCH, INC.	

Principal Place of Business 4543 WARING RD LAKELAND FL 33811	Mailing Address PO BOX 91162 LAKELAND FL 33805
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address 2415 Embury Ave.
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Haines City, FL	City & State Haines City, FL
Zip 33844	Country U.S.

	
1st MOORE	CR2E037 (10/07)
4. FEI Number NO-T APPLICABLE	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent WILLIAMS, MARGARET 2415 EMBRY AVE HAINE CITY FL 33844	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

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 Margaret Williams DT Margaret Williams	DATE 5/15/08

FILE NOW: FEE IS \$61.25 Due By May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
D COLLINS, MARCUS 401 ADAMS RD. MULBERRY FL 33860			
D FINLEY, MARTHA PO BOX 59 KATHLEEN FL 33849			
DT WILLIAMS, MARGARET 2415 EMBRY AVE HAINE CITY FL 33844			
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Margaret Williams D.T. Margaret Williams 5/15/08 863-422-2551