

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003699

FILED
Mar 04, 2009
Secretary of State

Entity Name: EMMANUEL BAPTIST CHURCH OF PAMPANO, INC.

Current Principal Place of Business:

700 NE 13 AVE
POMPANO BCH, FL 33060

New Principal Place of Business:

Current Mailing Address:

1107 SW 15 ST
#108
DEERFIELD BCH, FL 33064

New Mailing Address:

PO BOX 940
DEERFIELD BCH, FL 33443

FEI Number: 01-0603996

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROUZARD, MICHEL
1107 SW 15 ST
#108
DEERFIELD BCH, FL 33441 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROUZARD, MICHEL
Address: 1107 SW 15 ST.
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: D () Delete
Name: ALEXANDRE, ALPHONSE
Address: 610 NW 7 AVE #53
City-St-Zip: POMPANO BEACH, FL 33060

Title: S () Delete
Name: ETIENNE, ROSENIQUE
Address: 1301 SW 11 AVE
City-St-Zip: DEERFIELD BCH, FL 33411

Title: T () Delete
Name: LORMÉUS, JACQUELINE
Address: 4101 NE 18 AVE
City-St-Zip: POMPANO BEACH, FL 33064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MICHEL ROUZARD

PD

03/04/2009

Electronic Signature of Signing Officer or Director

Date