2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008143

Entity Name: IMMANUEL ANGLICAN CHURCH, INC.

FILED Mar 23, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
4429 SE 3R KEYSTONE	RD PLACE E HEIGHTS, FL	. 32656						
Current Mailing Address:				New Mailing Address:				
P. O. BOX 2012 KEYSTONE HEIGHTS, FL 32656								
FEI Number: 20-5397718 FEI Number Applied For ()			FEI Nun	Number Not Applicable () Certificate of Status Desired (X)				
Name and Address of Current Registered Agent: Name and A						Address of New Registered Agent:		
RUDD, DOUGLAS L 6240 PAYNE RD. KEYSTONE HEIGHTS, FL 32656 US				DABNEY, JOHN D 4429 SE 3RD PLACE. KEYSTONE HEIGHTS, FL 32656 US				
The above in the State		ubmits this statement for the pu	rpose o	f changing it	s registered	office or regi	stered agent, or both,	
SIGNATURE: JOHN D DABNEY				03/23/2009				
	Electronic	Signature of Registered Agen	t			Da	te	
OFFICERS AND DIRECTORS:				ADDITION	S/CHANGES	S TO OFFIC	ERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () EDABNEY, JOHN I 4429 SE 3RD PL KEYSTONE HEIG			Title: Name: Address: City-St-Zip:	() Change()/	Addition	
Title: Name: Address: City-St-Zip:	VD () E RUDD, DOUGLAS 6240 PAYNE RD KEYSTONE HEIG			Title: Name: Address: City-St-Zip:	VD (X EILAND, DAN 21029 NE 101 EARLTON, FL		Addition	
Title: Name: Address: City-St-Zip:	TS () DABNEY, NANCY 4429 SE 3RD PL KEYSTONE HEIG			Title: Name: Address: City-St-Zip:	() Change()/	Addition	
Title: Name: Address: City-St-Zip:	D () E GRIGGS, WILLIE 6379 MARLBROO KEYSTONE HEIG	OK CT		Title: Name: Address: City-St-Zip:	() Change()/	Addition	
Title: Name: Address: City-St-Zip:	D () E STERBLING, FRA 6385 ROLLING H KEYSTONE HEIG	HILLS AVE		Title: Name: Address: City-St-Zip:	JONES, ROBI 5090 KLARE I			
Title: Name:	D () [ALTMAN, STANLI	Delete EY		Title: Name:	() Change ()	Addition	

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.

Address:

City-St-Zip:

SIGNATURE: NANCY R DABNEY TS 03/23/2009

Address:

City-St-Zip:

5185 INDIAN TRAIL

KEYSTONE HEIGHTS, FL 32656