

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004520

FILED
Apr 29, 2009
Secretary of State

Entity Name: EMANUEL MISSIONARY BAPTIST CHURCH, INC.

Current Principal Place of Business:

1203 NE 8TH AVE
GAINESVILLE, FL 32641

New Principal Place of Business:

Current Mailing Address:

1203 NE 8TH AVE
GAINESVILLE, FL 32641

New Mailing Address:

FEI Number: 38-3782187

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAISON, WILLIE E
1310 SW 104TH ST
GAINESVILLE, FL 32641 US

Name and Address of New Registered Agent:

CAISON, WILLIE E
1310 SW 104TH ST
GAINESVILLE, FL 32641 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: WILLIE E. CAISON

04/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CAISON, WILLIE E
Address: 1310 SW 104TH STREET
City-St-Zip: GAINESVILLE, FL 32607

Title: D () Delete
Name: SHOWERS, ROBERT
Address: 2219 NW 214 LANE
City-St-Zip: GAINESVILLE, FL 32210

Title: DS () Delete
Name: MALLORY, MARY
Address: 1817 SE 13TH PALCE
City-St-Zip: GAINESVILLE, FL 32641

Title: DA () Delete
Name: BURKE, WANDA
Address: 4024 NE 1ST 13TH PLACE
City-St-Zip: GAINESVILLE, FL 32609

Title: D () Delete
Name: BRYANT, D'EITIA
Address: 3111 NE 14TH STREET
City-St-Zip: GAINESVILLE, FL 32609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: CAISON, WILLIE E
Address: 1310 SW 104TH STREET
City-St-Zip: GAINESVILLE, FL 32607

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: SEC (X) Change () Addition
Name: JONES, MARY
Address: 1203 NE 8TH AVE
City-St-Zip: GAINESVILLE, FL 32601

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: WILLIE E CAISON

PRES

04/29/2009

Electronic Signature of Signing Officer or Director

Date