

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10946

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Entity Name:** EMMANUEL BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

5391 JOHNSON RD  
COCONUT CREEK, FL 33073

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 970550  
COCONUT CREEK, FL 33097

**New Mailing Address:**

**FEI Number:** 59-2614428

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

LEON, CARMAN J. JR. ESQ  
411 E HILLSBORO BLVD.  
DEERFIELD BEACH, 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:** D  
**Name:** BARKER, CHUCK DEACON  
**Address:** 4881 NW 18TH AVE  
**City-St-Zip:** DEERFIELD BEACH, FL 33064

**Title:** D  
**Name:** HUGHES, WILLIAM PASTOR  
**Address:** 5391 JOHNSON ROAD  
**City-St-Zip:** COCONUT CREEK, FL 33073

**Title:** D  
**Name:** DIEKEMA, ROBERT PASTOR  
**Address:** 5391 JOHNSON ROAD  
**City-St-Zip:** COCONUT CREEK, FL 33073

**Title:** D  
**Name:** SMITH, JEFF PASTOR  
**Address:** 5391 JOHNSON ROAD  
**City-St-Zip:** COCONUT CREEK, FL 33073

**Title:** D  
**Name:** MCDANIEL, ROBERT DEACON  
**Address:** 5391 JOHNSON ROAD  
**City-St-Zip:** COCONUT CREEK, FL 33073

**Title:** D  
**Name:** CROWE, DONALD DEACON  
**Address:** 5391 JOHNSON ROAD  
**City-St-Zip:** COCONUT, FL 33073

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:** DONALD R. CROWE

D

01/05/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date