


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

FILED
Apr 30, 2008 08:00 AM
Secretary of State

DOCUMENT # N21767			
1. Entity Name EMMANUEL CHURCH OF CHRIST, INC.			
Principal Place of Business 2818 S. FERN CREEK AV. ORLANDO FL 32806 US		Mailing Address 2818 S. FERN CREEK AV ORLANDO FL 32806 US	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address <i>same</i>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 59-2892453		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent VENEGAS, PEGGY A P 2818 S. FERN CREEK AVE. ORLANDO FL 32806-5541		7. Name and Address of New Registered Agent Name <i>same</i> 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 <i>Eld Segun Venegas</i> DATE <i>4-25-08</i> <small>Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			



1st MOORE CR2E037 (10/07) *ck# 105-A*

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	D GENE BAGBY THOMAS JEFFERSON HWY, PO BOX 775 ELKTON KY 42220	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>same</i> U00000937593 05/27/08-80058-005 70.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD VENEGAS, JUSTO HUGO 2818 S FERN CREEK AVE ORLANDO FL 32806	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>same</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS JANICE LOPER 414 E PINE ST ORLANDO FL 32801	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>same</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VENEGAS, REYNALDO A 2903 HARRISON AVE. ORLANDO FL 32804	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>same</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DOMINGUEZ, DORIS J 2214 LUCERNE TERR ORLANDO FL 32806	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>same</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DA JONES, KATHY E 509 RIVIERA DR ALTAMONTE SPRINGS FL 32701	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>same</i>

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: *Eld Segun Venegas* **4-25-08**