

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23026

FILED
Jun 16, 2009
Secretary of State

Entity Name: EMMANUEL BAPTIST CHURCH OF PARRISH, INC.

Current Principal Place of Business:

8305 US HWY 301, NORTH
PARRISH, FL 34219

New Principal Place of Business:

Current Mailing Address:

8305 US HWY 301, NORTH
PARRISH, FL 34219

New Mailing Address:

FEI Number: 65-0023845 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HARTMAN, KENNETH A
8503 PRINCESS CT
PALMETTO, FL 34221 US

Name and Address of New Registered Agent:

DODD, SAMUEL K
3998 45TH ST E
BRADENTON, FL 34208 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: SAMUEL K DODD

06/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HARTMAN, KENNETH A
Address: 8503 PRINCESS CT
City-St-Zip: PALMETTO, FL 34221

Title: D () Delete
Name: WILLIS, RILLY R
Address: 4906 ERIE RD
City-St-Zip: PARRISH, FL 34219

Title: D () Delete
Name: MCGUIRE, CAROL
Address: 11690 ERIE RD
City-St-Zip: PARRISH, FL 34219

Title: D () Delete
Name: BUHR, MARJORIE S
Address: 8104 LAKE DR
City-St-Zip: PALMETTO, FL 34221

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DODD, SAMUEL K
Address: 3998 45TH ST E
City-St-Zip: BRADENTON, FL 34208

Title: V (X) Change () Addition
Name: STOKES, WILLIAM D
Address: 396 COQUINA DR
City-St-Zip: ELLENTON, FL 34222

Title: T (X) Change () Addition
Name: MCGUIRE, CAROL
Address: 11690 ERIE RD
City-St-Zip: PARRISH, FL 34219

Title: S (X) Change () Addition
Name: BUHR, MARJORIE S
Address: 8104 LAKE DR
City-St-Zip: PALMETTO, FL 34221

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: SAMUEL K DODD

P

06/16/2009

Electronic Signature of Signing Officer or Director

Date