

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25040

FILED
May 09, 2009
Secretary of State

Entity Name: EMMANUEL PENTECOSTAL ASSEMBLY OF GOD, INC

Current Principal Place of Business:

3960 NEW LONDON STREET
NORTH PORT, FL 34288 US

New Principal Place of Business:

Current Mailing Address:

3960 NEW LONDON STREET
NORTH PORT, FL 34288 US

New Mailing Address:

FEI Number: 26-2332037 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

JOHNSON, MABEL
2309 BROWN STERET
PORT CHARLOTTE, FL 33948 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 () Delete
Name: FARGUHARSON, MICHELLE
Address: 21276 PEMBERTON AVE
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: P () Delete
Name: JOHNSON, MABEL
Address: 2309 BROWN STREET
City-St-Zip: PORT CHARLOTTE, FL

Title: VD () Delete
Name: JOHNSON, NAOMI
Address: 2309 BROWN STREET
City-St-Zip: PORT CHARLOTTE, FL

Title: TD () Delete
Name: BATTLE, RUTH
Address: 2308 BROWN ST
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: S () Delete
Name: BELOTTE, NOREEN
Address: 370 MACARTHUR AVE
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: D () Delete
Name: LEVY, CHRISTOPHER SR
Address: 5289 ANDIS ST
City-St-Zip: NORTH PORT, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: R.A. BATTLE

TD

05/09/2009

Electronic Signature of Signing Officer or Director

Date