


FILE NOW: FILING FEE IS \$61.25

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Oct 01 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandri B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N32643 (1)
1. Corporation Name
EMMANUEL CHRISTIAN CHURCH OF SPRING HILL, INC.

Principal Place of Business 275 Della Court Spring Hill, Fl. 34606	Mailing Address 275 Della Court Spring Hill, FL. 34606
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AMENDMENT

3. Date Incorporated or Qualified 06/01/89	
4. FEI Number 59-2961596	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country
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9. Name and Address of Current Registered Agent

David M. Barry
275 Della Court
Spring Hill, FL. 34606

10. Name and Address of New Registered Agent

81 Name **William C. Wilson**
82 Street Address (P.O. Box Number is Not Acceptable)
4319 River Birch Drive
83
84 City **Spring Hill,** FL 85 Zip Code **34607**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0502, Florida Statutes.

SIGNATURE **William C. Wilson** *William C. Wilson* **7/3/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P/T <input type="checkbox"/> DELETE	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	William C. Wilson	12 NAME	
STREET ADDRESS	4319 River Birch Drive	13 STREET ADDRESS	
CITY-ST-ZIP	Spring Hill, Fl. 34607	14 CITY-ST-ZIP	
TITLE	D. <input type="checkbox"/> DELETE	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Beverly C. Wilson	22 NAME	
STREET ADDRESS	4319 River Birch Drive	23 STREET ADDRESS	
CITY-ST-ZIP	Spring Hill, Fl. 34607	24 CITY-ST-ZIP	
TITLE	D. <input type="checkbox"/> DELETE	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Bettie C. Fitzpatrick	32 NAME	
STREET ADDRESS	7610 Gates Circle	33 STREET ADDRESS	
CITY-ST-ZIP	Spring Hill, Fl. 34606	34 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Evelyn Antoniewicz	42 NAME	
STREET ADDRESS	298 Galaxy Avenue	43 STREET ADDRESS	
CITY-ST-ZIP	Spring Hill, Fl. 34606	44 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Carl Zooberg	52 NAME	
STREET ADDRESS	7265 Royal Oak Drive	53 STREET ADDRESS	400002653954
CITY-ST-ZIP	Spring Hill, Fl. 34607	54 CITY-ST-ZIP	-10/02/98---01008---029
TITLE	<input type="checkbox"/> DELETE	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: **William C. Wilson** *William C. Wilson* **7/3/98** (352) 683-0083

CR2E037 (10/97)

12/10-1