

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46197

FILED
Apr 27, 2004
Secretary of State

Entity Name: EMMANUEL TABERNACLE BAPTIST CHURCH APOSTOLIC FAITH, INC.

Current Principal Place of Business:

7316 S SWOOPE ST
4003 LASALLE ST
TAMPA, FL 33616 US

New Principal Place of Business:

Current Mailing Address:

PORT TAMPA ON IDAHO AND SWOOPE ST
4003 LASALLE ST
TAMPA, FL 33607

New Mailing Address:

FEI Number: 59-3095047

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, OLLIE MAE
4003 LASALLE ST
TAMPA, FL 33607 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: ANDERSON, KENNETH G.,
Address: 4003 LASALLE ST.
City-St-Zip: TAMPA, FL 33607

Title: S () Delete
Name: ANDERSON, OLLIE MAE,
Address: 4003 LA SALLE ST.
City-St-Zip: TAMPA, FL 33616

Title: T () Delete
Name: THOMPSON, ESSIE,
Address: 7502 GERMER ST.
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: BROWN, SELMA,
Address: 2702 BEACH ST.
City-St-Zip: TAMPA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ANDERSON, RONALD J.,
Address: 9217 KNIGHTS BRANCH ST..
City-St-Zip: TAMPA, FL 33637

Title: () Change () Addition
Name:
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 for the exemption stated in Section 119.07(3)(i), 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: RONALD J. ANDERSON

D

04/27/2004

Electronic Signature of Signing Officer or Director

Date