

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 12, 2003 8:00 am
Secretary of State

02-12-2003 90090 029 ****61.25

DOCUMENT # N51409

1. Entity Name

EMMANUEL BAPTIST CHURCH, INC.



Principal Place of Business

**1901 BARBADOS ROAD
LAKE CLARKE SHORES FL 33406-6732**

Mailing Address

**1901 BARBADOS ROAD
LAKE CLARKE SHORES FL 33406-6732**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2190197**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WILSON, CRAIG
1901 BARBADOS ROAD
LAKE CLARKE SHORES FL 33406**

Name

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete
NAME **TOULSON, TERRY**
STREET ADDRESS **238 BILBOA STREET**
CITY-ST-ZIP **ROYAL PALM BEACH FL 33411**

TITLE **TRUSTEE** ☐ Change ☒ Addition
NAME **GERALD WILSON**
STREET ADDRESS **ONE ROBERT CIRCLE**
CITY-ST-ZIP **BOYNTON BEACH, FL 33426**

TITLE **TREASURER** ☐ Delete
NAME **JORDAN, BETTY**
STREET ADDRESS **6395 CARTHAGE CIRCLE SOUTH**
CITY-ST-ZIP **LAKE WORTH FL 33463**

TITLE **TRUSTEE** ☐ Change ☒ Addition
NAME **RAY JONES**
STREET ADDRESS **102 KNIGHT COURT**
CITY-ST-ZIP **ROYAL PALM BEACH, FL 33411**

TITLE **D** ☐ Delete
NAME **PRESS, TED**
STREET ADDRESS **3521 DELLWOOD BLVD.**
CITY-ST-ZIP **ROYAL PALM BEACH FL 33470**

TITLE **D** ☐ Change ☒ Addition
NAME **FRANK SLINGERLAND**
STREET ADDRESS **383 LAS PALMAS ST.**
CITY-ST-ZIP **ROYAL PALM BEACH, FL 33411**

TITLE **D** ☒ Delete
NAME **LESTER, CHUCK**
STREET ADDRESS **117 SARATOGA BLVD. WEST**
CITY-ST-ZIP **ROYAL PALM BEACH FL 33411**

TITLE **D** ☐ Change ☒ Addition
NAME **CARLTON CAUSEY**
STREET ADDRESS **7170 HIGH SIERRA CIRCLE**
CITY-ST-ZIP **WEST PALM BEACH, FL 33411**

TITLE **TRUSTEE** ☒ Delete
NAME **MCGUIRE, BOB**
STREET ADDRESS **PLAINS DR**
CITY-ST-ZIP **LAKE WORTH FL 33436**

TITLE **TRUSTEE** ☒ Change ☒ Addition
NAME **HUGH SCOTT**
STREET ADDRESS **207 SARATOGA BLVD. E.**
CITY-ST-ZIP **ROYAL PALM BEACH, FL 33411**

TITLE **TREASURER AND TRUSTEE** ☐ Delete
NAME **COX, TOM**
STREET ADDRESS **1746 BBEY RD. F-108**
CITY-ST-ZIP **WEST PALM BEACH FL 33415**

TITLE **TRUSTEE** ☐ Change ☒ Addition
NAME **DALE SCHEXNAYDER**
STREET ADDRESS **8640 ROSALIE COURT**
CITY-ST-ZIP **BOYNTON BEACH, FL 33437**

12. 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 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:

SIGNATURE REQUIRED

2/9/03 561-967-1149

CR2E037 (10/02)