

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001567

Entity Name: EMMANUEL FELLOWSHIP, INC.

FILED
May 04, 2009
Secretary of State

Current Principal Place of Business:

3501 37TH STREET SOUTH
SAINT PETERSBURG, FL 33712

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 15993
ST PETERSBURG, FL 337335993 US

New Mailing Address:

FEI Number: 59-3475248 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:

EVANS, FRANKLIN SR
493 37TH ST N
ST PETERSBURG, FL 33710 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: V () Delete
Name: EVANS, REBECCA
Address: 493 54TH ST N
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: T () Delete
Name: EVANS, FRANKLIN JR
Address: 5502 APT 1906
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: TS () Delete
Name: ROLLINS, GWEN
Address: 493 54TH ST N
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: T () Delete
Name: EVANS, ERIKA
Address: 493 54TH ST N
City-St-Zip: ST PETERSBURG, FL 33710

Title: P () Delete
Name: EVANS, FRANKLIN SR
Address: 493 54TH ST N
City-St-Zip: SAINT PETERSBURG, FL 33710

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
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: GWEN ROLLINS

TS

05/04/2009

Electronic Signature of Signing Officer or Director

Date