

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N94000005311 (5)**

1. Corporation Name
EMMANUEL MINISTRIES, INC.



Principal Place of Business: **360L THREE LAKES LANE VENICE FL 34292**
Mailing Address: **P.O. BOX 6161 VENICE FL 34292**

3. Date Incorporated or Qualified: **10/24/1994**
3a. Date of Last Report: **05/01/1995**

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21		26		APPLIED FOR 58-2182188		Not Applicable	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
23 City & State		28 City & State		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
24 Zip		25 Country		29 Zip		30 Country	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
VARNADORE, DONALD G 360L THREE LAKES LANE VENICE FL 34292				B1 Name			
				B2 Street Address (P.O. Box Number is Not Acceptable)			
				B3			
				B4 City			
				FL 85 Zip Code			

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 617.0503, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD VARNADORE, DONALD G <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VARNADORE, DONALD G	1.2 NAME	
STREET ADDRESS	3601 THREE LAKES LANE	1.3 STREET ADDRESS	
CITY-ST-ZIP	VENICE FL 34292	1.4 CITY-ST-ZIP	
TITLE	D SUMP, MARJORIE E <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SUMP, MARJORIE E	2.2 NAME	
STREET ADDRESS	900 S TAMiami TRAIL #606	2.3 STREET ADDRESS	
CITY-ST-ZIP	VENICE FL 34285	2.4 CITY-ST-ZIP	
TITLE	DS SHNER, JAMES E <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SHNER, JAMES E	3.2 NAME	
STREET ADDRESS	3603 CLEVELAND STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33609	3.4 CITY-ST-ZIP	
TITLE	D BOLES, RICHARD CPA <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOLES, RICHARD CPA	4.2 NAME	
STREET ADDRESS	1224 RIDGEWOOD AVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	VENICE FL 34292	4.4 CITY-ST-ZIP	
TITLE	TD VARNADORE, SHARON A <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VARNADORE, SHARON A	5.2 NAME	
STREET ADDRESS	3602 THE LAKES LANE	5.3 STREET ADDRESS	
CITY-ST-ZIP	VENICE FL 34292	5.4 CITY-ST-ZIP	
TITLE	D MULLEN, DAVID PHD <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MULLEN, DAVID PHD	6.2 NAME	
STREET ADDRESS	6704 36TH AVE EAST	6.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL 34208	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Donald G Varnadore Donald G VARNADORE 3-8-96 Date: 9411 452-5261

CR2E037 (12/95)