# FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 APR 18 PM 1:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N94000005341 (2)

1. Corporation Name
**EMMANUAL BAPTIST CHURCH OF BRADFORD COUNTY, INCO RPORATED**

| Principal Place of Business | Mailing Address |
|---|---|
| 124 N.W. AVENUE<br>LAKE BUTLER FL 32091 | RT. 4, BOX 2130<br>LAKE BUTLER FL 32054 |

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/27/1994
3a. Date of Last Report:
4. FEI Number: 59-2959754 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ — **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ — **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

| 2. Principal Place of Business | 2a. Mailing Address |
|---|---|
| 21 EMMANUEL BAPT. CH. INC. | 26 RT 1 BOX 566-E |
| Suite, Apt. #, etc.<br>22 124 NW AVENUE | Suite, Apt. #, etc.<br>27 |
| City & State<br>23 STARKE - BRADFORD CO. FL. | City & State<br>28 LAKE BUTLER FL. |
| Zip / Country<br>24 32091 / 25 USA | Zip / Country<br>29 32054 / 30 USA |

**9. Name and Address of Current Registered Agent**

HERRING, DAVID W
RT. 4, BOX 2130
LAKE BUTLER FL 32054

**10. Name and Address of New Registered Agent**

81 Name: DAVID W. HERRING (T)
82 Street Address (P.O. Box Number is Not Acceptable): RT. 4 BOX 2130
83
84 City: LAKE BUTLER FL 85 Zip Code: 32054

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: DAVID W. HERRING (David W Herring) 4-3-95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | PVTS<br>HERRING, DAVID<br>RT. 4, BOX 2130<br>LAKE BUTLER FL 32054-9729 | 11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP | LLOYD DAVIS<br>RT 2. BOX 48<br>HAWTHORNE FL. 32640 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | 21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP | T + SEC.<br>MARY J. HERRING<br>RT4. BOX 2130<br>LAKE BUTLER FL 32054-9729 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | 31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | 41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | 51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | 61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP | | ☐ Change ☐ Addition |

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:** DAVID HERRING (David Herring Jr) 3-31-1995 (904) 496-3100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0003743