

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

FILED Mar 24, 1999 8:00 am Secretary of State

03-24-1999 90097 050 \*\*\*\*61.25

DOCUMENT # N96000000408

1. Corporation Name

EMMANUEL INDEPENDENT METHODIST CHURCH, INC.

Principal Place of Business

1600 8TH AVENUE WEST PALMETTO FL 34221

Mailing Address

1600 8TH AVENUE WEST PALMETTO FL 34221



2. Principal Place of Business

21 3400 26 st. west

2a. Mailing Address

26 3400 26 st. west

Suite, Apt. #, etc.

22 E 84

Suite, Apt. #, etc.

27 E 84

City & State

23 Bradenton, FL

City & State

28 Bradenton, FL

Zip

24 34207

Country

25 manatee

Zip

29 34207

Country

30 manatee

3. Date Incorporated or Qualified

01/04/1996

4. FEI Number

65-0629904

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

9. Name and Address of Current Registered Agent

WHITAKER, SHIRLEY D 1600 8 AVE W PALMETTO FL 34221

10. Name and Address of New Registered Agent

81 Name Whitaker, Shirley D. 82 Street Address (P.O. Box Number is Not Acceptable) 3400 26 st. west E 84 83 84 City Bradenton FL 85 Zip Code 34207

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 Shirley D. Whitaker Shirley D. Whitaker 3-21-99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

Table with 4 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Rows include PD WHITAKER, SHIRLEY D; VD BROWN, ESSIE M; D MAYS, ELIZA; SD DIX, ALICE; TD FULLER, ETHEL.

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Table with 4 columns: 1.1 TITLE, 1.2 NAME, 1.3 STREET ADDRESS, 1.4 CITY-ST-ZIP. Rows include PD Whitaker, Shirley D.; VD Summers, Poncella; D Manning, LeFreida S.; TD Johnson, Tracy D.; TD Estralita Thompson.

14. 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 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, with all other like empowered.

SIGNATURE: Shirley D. Whitaker Shirley D. Whitaker 3/21/99 727-5137

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Day/Time Phone #

0066717

CR2E037-(11/98)