2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002867

FILED Mar 15, 2012 Secretary of State

Entity Name: EMMANUEL APOSTOLIC MINISTRIES, INC.

Current Principal Place of Business: New Principal Place of Business:

971 SW 71ST AVE 4949 NORTH STATE ROAD 7

NORTH LAUDERDALE, FL 33068 TAMARAC, FL 33319

Current Mailing Address: New Mailing Address:

PO BOX 938706 4949 NORTH STATE ROAD 7

MARGATE, FL 330938706 TAMARAC, FL 33319

FEI Number: 65-0670398 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LEWIS, LEARY M
276 SW EGRET LANDING
PORT SAINT LUCIE, FL 34953 US

LEWIS, LEARY M
5706 NW 68 TERRACE
TAMARAC, FL 33321 US

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: L.M.LEWIS 03/15/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

 Name:
 LEWIS, LEARY M

 Address:
 5706 NW 68 TERRACE

 City-St-Zip:
 TAMARAC, FL 33321

Title: VPD

Name: LEWIS, CORA R Address: 5706 NW 68 TERRACE City-St-Zip: TAMARAC, FL 33321

Title:

Name: ANDERSON, JAMES Address: 340 KATHY LANE City-St-Zip: MARGATE, FL 33068

Title:

Name: HAYLE, LINNETTE Address: 2300 CAMEO BLVD

City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: DS

 Name:
 KENNEDY, NOVLETTE

 Address:
 8934 NW 40 STREET

 City-St-Zip:
 CORAL SPRINGS, FL 33065

Title: DT

 Name:
 BERTRAM, MURDILLA

 Address:
 6614 OAKMOUNT

 City-St-Zip:
 N LAUDERDALE, FL 33068

I hereby 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 all other like empowered.

SIGNATURE: L.M.LEWIS PD 03/15/2012