

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



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

FILED  
Mar 30, 1999 8:00 am  
Secretary of State

03-30-1999 90016 048 \*\*\*\*61.25

DOCUMENT # N98000001286

1. Corporation Name

Emmanuel Charismatic Episcopal Church, Inc.

Principal Place of Business

4356 Tarpon Dr. SE  
St. Petersburg, FL  
33705

Mailing Address

PO Box 2126  
St. Petersburg, FL  
33731

2. Principal Place of Business

21 4300 4th St. N

Suite, Apt. #, etc.

22 B

City & State

23 St. Petersburg, FL

Zip Country

24 33703 25 Pinellas

9. Name and Address of Current Registered Agent

David Brookman  
4356 Tarpon Dr. SE  
St. Petersburg, FL 33705

26 2a. Mailing Address

Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

3/5/98

4. FEI Number

59-3483730

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

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP ☐ DELETE

NAME Rick E. Hatfield

STREET ADDRESS 2125 Alpine Ave.

CITY-ST-ZIP Sarasota, FL 34239-4113

TITLE DTS ☐ DELETE

NAME David Brookman

STREET ADDRESS 4356 Tarpon Dr. SE

CITY-ST-ZIP St. Petersburg, FL 33705

TITLE D ☐ DELETE

NAME James Nilon

STREET ADDRESS 1661 Arcadia Ave.

CITY-ST-ZIP Sarasota, FL 34239

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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:

*Rick E. Hatfield*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rick E. Hatfield

3/21/99

(727)804-1952

Date

Daytime Phone #

CR2E037 (11/98)