

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 17, 2006 8:00 am**  
**Secretary of State**

02-17-2006 90076 006 \*\*\*\*70.00

**DOCUMENT # N99000000669**

1. Entity Name

EMMANUEL HOLINESS CHURCH, INC.



Principal Place of Business

EMANUEL HOLINESS CHURCH  
3502 SANDRIDGE CHURCH ROAD  
GRANDRIDGE FL 32442

Mailing Address

3240 SANDRIDGE CHURCH RD  
SNEADS FL 32460



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-3542160

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HOWELL, EVA MAE  
3240 SANDRIDGE CHURCH ROAD  
SNEADS FL 32460

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Proctor/Director Eva Mae Howell Proctor*

2-6-06

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE DP ☐ Delete  
NAME HOWELL, EVA PD  
STREET ADDRESS 3240 SANDRIDGE CHURCH ROAD  
CITY-ST-ZIP SNEADS FL 32460

TITLE DT ☐ Delete  
NAME HOWELL, RAY C  
STREET ADDRESS 3240 SANDRIDGE CHURCH ROAD  
CITY-ST-ZIP SNEADS FL 32460

TITLE DBM ☐ Delete  
NAME HOWELL, RANDY C  
STREET ADDRESS 3242 SANDRIDGE CHURCH ROAD  
CITY-ST-ZIP SNEADS FL 32460

TITLE DBM ☐ Delete  
NAME BELL, JEFFREY  
STREET ADDRESS 3201 SALEM CHURCH ROAD  
CITY-ST-ZIP GRANDRIDGE FL 32442

TITLE DBM ☐ Delete  
NAME BURNS, NOAH  
STREET ADDRESS 2268 BRUSHEY POND ROAD  
CITY-ST-ZIP GRANDRIDGE FL 32442

TITLE DBM ☐ Delete  
NAME HAMILTON, JASON  
STREET ADDRESS 5017A SPRUCE LN.  
CITY-ST-ZIP MARIANNA FL 32446

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DME ☐ Change ☒ Addition  
NAME JERRY PROCTOR  
STREET ADDRESS 2068 sandridge ch. rd.  
CITY-ST-ZIP grandridge fla. 32442

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*R. J. Eva Mae Howell*

2-6-06

850-583-5167