

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004183

FILED  
Apr 28, 2005  
Secretary of State

**Entity Name:** EMMANUEL BAPTIST CHURCH OF HILLSBOROUGH COUNTY, INC.

**Current Principal Place of Business:**

9812 HARNEY ROAD  
THONOTOSASSA, FL 33592

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 325  
THONOTOSASSA, FL 33592

**New Mailing Address:**

**FEI Number:** 59-3574103

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HENNESSEY, D MICHAEL  
7122 QUAIL HOLLOW BLVD  
WESLEY CHAPEL, FL 33544 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete  
Name: PERRY, ANTHONY G  
Address: 9816 HERNEY RD  
City-St-Zip: THONOTOSASSA, FL 33592

Title: SD ( ) Delete  
Name: ROBERTS, AUREOLA  
Address: 16016 WYNDOVER RD.  
City-St-Zip: TAMPA, FL 33647

Title: D ( ) Delete  
Name: BRADLEY, RICHARD  
Address: 6252 SADDLETREE DRIVE  
City-St-Zip: WESLEY CHAPEL, FL 33544

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ANTHONY G. PERRY

PTD

04/28/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date