

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000010489

FILED  
Apr 13, 2012  
Secretary of State

Entity Name: EMMANUEL (FC) CHURCH MINISTRY, INC.

**Current Principal Place of Business:**

5466 COLLINS CHAPEL ROAD  
MALONE, FL 32445

**New Principal Place of Business:**

**Current Mailing Address:**

5466 COLLINS CHAPEL ROAD  
MALONE, FL 32445

**New Mailing Address:**

FEI Number: 27-1202409

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

SMITH, VIRGINIA M  
5458 COLLINS CHAPLE ROAD  
MALONE, FL 32445 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: P  
Name: SMITH, TYRONE D  
Address: 878 ARLINGTON CIRCLE  
City-St-Zip: QUINCY, FL 32351

Title: VP  
Name: IVEY, BRUCE  
Address: 138 GENE WILLIAMS RAOD  
City-St-Zip: QUINCY, FL 32351

Title: S  
Name: SMITH, TE'AIRA  
Address: 878 ARLINGTON CIRCLE  
City-St-Zip: QUINCY, FL 32351

Title: T  
Name: DRAPER, VODELLA  
Address: 4504 MT. PLEASANT ROAD  
City-St-Zip: QUINCY, FL 32351

Title: D  
Name: SMITH, VIRGINIA M  
Address: 5458 COLLINS CHAPLE ROAD  
City-St-Zip: MALONE, FL 32445

Title: D  
Name: DRAPER, TERRANCE  
Address: 4504 MT. PLEASANT ROAD  
City-St-Zip: QUINCY, FL 32445

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: VIRGINIA M. SMITH

D

04/13/2012

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

\_\_\_\_\_  
Date