

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 703957

**Entity Name:** EMMAUS BAPTIST COLLEGE, INC.

**Current Principal Place of Business:**

706 DEW BLOOM RD  
BRANDON, FL 33511

**FILED**  
**Mar 18, 2014**  
**Secretary of State**  
**CC1581431316**

**Current Mailing Address:**

P.O. BOX 2758  
BRANDON, FL 33509

**FEI Number: 23-7202810**

**Certificate of Status Desired: Yes**

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

MCALISTER, RAYMOND  
706 DEW BLOOM ROAD  
BRANDON, FL 33511 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name MCALISTER, RAYMOND DR.  
Address 706 DEW BLOOM RD.  
City-State-Zip: BRANDON FL 33511

Title TE  
Name PRICE, DAVID  
Address 406 MAIN STREET  
City-State-Zip: AUBURNDALE FL 33823

Title TRUSTEE  
Name KITCHELL, JANE  
Address 4311 CULBREATH ROAD  
City-State-Zip: VALRICO FL 33596

Title TE  
Name TANNER, WAYNE  
Address 1310 NE SECOND STREET  
City-State-Zip: MULBERRY FL 33860

Title TE  
Name HAYES, JERRY  
Address 1401 NE FIRST ST  
City-State-Zip: MULBERRY FL 33860

Title TRUSTEE  
Name LANIER, WALTER  
Address P.O. BOX 1827  
City-State-Zip: WINTER HAVEN FL 33882-1827

*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: RAYMOND MCALISTER**

**PRESIDENT**

**03/18/2014**

Electronic Signature of Signing Officer/Director Detail

Date