

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000008713

**Entity Name:** EMMANUEL BAPTIST CHURCH OF HOLINESS INC.

**Current Principal Place of Business:**

3420 DAVIE BOULEVARD  
FORT LAUDERDALE, FL 33312

**Current Mailing Address:**

PO BOX 122152  
FORT LAUDERDALE, FL 33312 US

**FEI Number: 01-0762500**

**Certificate of Status Desired: No**

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

TOUSSAINT, JOSUE  
2201 NW 80 AVE  
SUNRISE, FL 33322 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 PASTOR, PRESIDENT  
Name TOUSSAINT, JOSUE  
Address 2201 NW 80 AVENUE  
City-State-Zip: SUNRISE FL 33322

Title CHURCH ADMINISTRATOR  
Name TOUSSAINT, MARIE H  
Address 2201 NW 80 AVENUE  
City-State-Zip: SUNRISE FL 33322

Title TREASURER  
Name PIERRE, MARIE  
Address 3420 DAVIE BLVD  
City-State-Zip: FT LAUDERDALE FL 33312

Title SECRETARY  
Name SICLAIT, RACHELLE  
Address 2201 NW 80 AVENUE  
City-State-Zip: SUNRISE FL 33322

Title TREASURER ASSISTANT  
Name LOUIS, PATRICK  
Address 3420 DAVIE BOULEVARD  
City-State-Zip: FORT LAUDERDALE FL 33312

Title CHURCH MEMBER  
Name EMMANUEL CHARLES  
Address 3420 DAVIE BOULEVARD  
City-State-Zip: FORT LAUDERDALE FL 33312

*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: JOSUE TOUSSAINT**

**PASTOR**

**03/13/2023**

Electronic Signature of Signing Officer/Director Detail

Date