

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000010489

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

**Current Principal Place of Business:**

5466 COLLINS CHAPEL ROAD  
MALONE, FL 32445

**Current Mailing Address:**

5466 COLLINS CHAPEL ROAD  
MALONE, FL 32445

**FEI Number: 27-1202409**

**Certificate of Status Desired: Yes**

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

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

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

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

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

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

Title D  
Name DRAPER, TERRANCE  
Address 4504 MT. PLEASANT ROAD  
City-State-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: BRUCE IVEY**

**DIRECTOR**

**03/14/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date