

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000012057

Entity Name: EMMAUS MINISTRIES, INC.**Current Principal Place of Business:**1395 CAMPUS VIEW CT.
OVIEDO, FL 32765**Current Mailing Address:**P.O. BOX 620473
OVIEDO, FL 32762-0473 US**FEI Number:** 47-0981342**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**IVES, CALEB M.
1048 CALIFORNIA CREEK DRIVE
OVIEDO, FL 32765 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:** CALEB IVES

01/29/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PD	Title	BOARD MEMBER
Name	IVES, CALEB M.	Name	GREEN, IMAN
Address	1601 ALAFAYA TRL	Address	1601 ALAFAYA TRL
City-State-Zip:	OVIEDO FL 32765	City-State-Zip:	OVIEDO FL 32765
Title	BOARD MEMBER, TREASURER	Title	BOARD MEMBER
Name	SNYDER, JERRY	Name	JAGEN, TYLER
Address	1601 ALAFAYA TRL	Address	1601 ALAFAYA TRL
City-State-Zip:	OVIEDO FL 32765	City-State-Zip:	OVIEDO FL 32765
Title	VP	Title	BOARD MEMBER
Name	ROGERS, GROVER T.	Name	WISE, SARAH
Address	1601 ALAFAYA TRAIL	Address	1601 ALAFAYA TRAIL
City-State-Zip:	OVIEDO FL 32765	City-State-Zip:	OVIEDO FL 32765
Title	TREASURER	Title	SECRETARY
Name	NASON, CAROLINE MARIE-OCAMPO	Name	PHANEUF, MORGAN
Address	315 GOOSE CREEK DRIVE	Address	2029 PONDEROSA AVE
City-State-Zip:	WINTER SPRINGS FL 32708	City-State-Zip:	WINTER PARK FL 32792-2063

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: CALEB IVES

01/29/2023

Electronic Signature of Signing Officer/Director Detail

Date