

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

DOCUMENT# N93000004482

**Entity Name:** IMMANUEL FULL GOSPEL BAPTIST CHURCH INC.

**Current Principal Place of Business:**

1200 N MLK BLVD  
FT. PIERCE, FL 34950

**Current Mailing Address:**

P.O. BOX 1326  
FT. PIERCE, FL 34954 US

**FEI Number: 65-0419398**

**Certificate of Status Desired: No**

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

FISHER, ROBERT P/D  
1018 SW ESTAUGH AVE  
PORT ST LUCIE, FL 34953 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/D  
Name FISHER, ROBERT JR  
Address 1018 SW ESTAUGH AVE  
City-State-Zip: PORT ST LUCIE FL 34953

Title S  
Name KNIGHT, LILLIE  
Address 1606 NORTH 18TH STREET  
City-State-Zip: FT. PIERCE FL 34950

Title T  
Name BOSTON, WILLIE  
Address 2804 KINGSLEY ST  
City-State-Zip: FT PIERCE FL 34946

Title V/D  
Name KNIGHT, ISAAC  
Address 1606 N 18TH ST  
City-State-Zip: FT. PIERCE FL 34950

Title STRA  
Name DENNIS, CYNTHIA  
Address 2225 N 53RD STREET  
City-State-Zip: FT PIERCE FL 34946

*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: ROBERT FISHER**

**P/D**

**04/15/2013**

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

\_\_\_\_\_  
Date