

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2004 8:00 am
Secretary of State

04-27-2004 90088 028 ****61.25

DOCUMENT # 710136 1. Entity Name BETHEL RENEWAL CHURCH, INC.					
Principal Place of Business 711 ST. JOHNS BLUFF RD. JACKSONVILLE, FL 32225			Mailing Address 711 ST. JOHNS BLUFF RD. JACKSONVILLE, FL 32225		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent WOODARD, DAVID 7780 ALLSPICE CIRCLE EAST JACKSONVILLE, FL 32244				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <i>David E. Woodard</i> Signature, typed or printed name of registered agent and title if applicable. <i>David E. Woodard Asst. Pastor VDT</i> (NOTE: Registered Agent signature required when reinstating) <i>4/23/04</i> DATE					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LYON, RICHARD 8469 SPICEWOOD DRIVE JACKSONVILLE, FL 322161518 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Lydia Walton 9725 Doolittle Rd Jacksonville, FL 32246 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VDT WOODARD, DAVID 7780 ALL SPICE CIRCLE EAST JACKSONVILLE, FL 322447035 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Denise Strong 1123 South Shore Jacksonville, FL ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS LYON, WANETA 8469 SPICEWOOD DRIVE JACKSONVILLE, FL 322161518 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary/Treasurer LYON, WANETA 8469 Spicewood Dr Jacksonville, FL 32216 ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Eldon Dewitt 2044 Sprinkle Dr. Jacksonville, FL 32211 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Jeff Martin 13958 Spanish Marsh Ct Jacksonville, FL 32225 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>David E. Woodard</i> David E. Woodard <i>4/23/04</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					