2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 732529

1. Entity Name

BETHEL GOSPEL CHAPEL, INC.

FILED
Jul 21, 2000 8:00 am
Secretary of State
07-21-2000 90156 044 ****61.25

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
1444 NW 15TH AVENUE P. O. BOX 9241 LAUDERDALE MANOR FL 33311	1444 NW 15TH AVENUE P. O. BOX 9241 LAUDERDALE MANOR FL 33311

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 23-7449994 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
DYAL, J. PATRICK 800 E. BROWARD BLVD. FT. LAUDERDALE FL 33301	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.

SIGNATURE ____________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
After September 13, 2000 min. will be $236.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	PT	☐ Delete	TITLE	☐ Change ☐ Addition
NAME	WOODBURN, EATON		NAME	
STREET ADDRESS	4220 N W 26TH STREET		STREET ADDRESS	
CITY-ST-ZIP	LAUDERHILL FL 33313		CITY-ST-ZIP	
TITLE	VPT	☐ Delete	TITLE	☐ Change ☐ Addition
NAME	MCGIBBON, ABRAHAM		NAME	
STREET ADDRESS	5825 N PLUM BAY PKWY		STREET ADDRESS	
CITY-ST-ZIP	TAMARAC FL 33321		CITY-ST-ZIP	
TITLE	T	☐ Delete	TITLE	☐ Change ☐ Addition
NAME	DAWKINS, PETER		NAME	
STREET ADDRESS	7061 N W 49TH PL		STREET ADDRESS	
CITY-ST-ZIP	LAUDERHILL FL 33319		CITY-ST-ZIP	
TITLE	S	☐ Delete	TITLE	☐ Change ☐ Addition
NAME	KNIGHT, ANTHONY		NAME	
STREET ADDRESS	7920 S W 8TH CT		STREET ADDRESS	
CITY-ST-ZIP	N LAUDERDALE FL 33068		CITY-ST-ZIP	
TITLE	T	☐ Delete	TITLE	☐ Change ☐ Addition
NAME	HIGGINS, HERBERT		NAME	
STREET ADDRESS	7308 N W 1ST CT		STREET ADDRESS	
CITY-ST-ZIP	PLANTATION FL 33317		CITY-ST-ZIP	
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition
NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	

CR2E037 (5/00)

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: Peter Dawkins SIGNATURE REQUIRED 7/14/00 954-786 8668 X6433
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #