2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Feb 22, 2007 8:00 am Secretary of State DOCUMENT # N02000003745 1. Entity Name 02-22-2007 90026 011 ****61.25 BETHEL BAPTIST CHURCH OF LAKE PLACID, INC. Principal Place of Business Mailing Address 216 EAST PARK STREET 216 EAST PARK STREET LAKE PLACID FL 33852 LAKE PLACID FL 33852 2. Principal Place of Business - No P.O Box # 3. Mailing Address Suite. Apt # etc. Suite Ant # etc. 1st MOORE CR2E037 (10/06) City & State City & State 4. FEI Number Applied For 03-0443626 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo WHIPPLE, HARRY W Street Address (P.O. Box Number is Not Acceptable) 2420 NORTH PRIMROSE ROAD AVON PARK FL 33825 Zip Code F١ 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. SIGNĄTURE Signature, typed or printed name of registered agent and title it applicable (NOTE: Registered Agent signature regulated when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2007 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11 SD THE M Change ☐ Addition TIME SD **⊠** Delete NAME NAME JOHNSON, MARVIN RILEY, DONALD STREET ADDRESS STREET ADDRESS 1717 CRESCENT VALLEYU RANCH ROAD 814 WESTERN BLVD. CHY ST ZIP CITY ST-718 DAVENPORT FL 33837 LAKE PLACID, FL 33852 Change ☐ Addition TIME Delete NAME WHIPPLE, HARRY NAME STREET ADDRESS STREET ADDRESS 2420 N PRIMROSE RD CITY ST 7IP CITY - ST- 7IP AVON PARK FL 33825 Change ЙШ TD Delete 1011 ☐ Addition NAMÉ NAMI HARGRAVES, CLAY STREET ADDRESS STREET ADDRESS 501 CHELSEE WY CITY ST-ZIP CHY ST 7IP LAKE PLACID FL 33852 THILE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY S1-7IP CHY-ST-ZIP ☐ Delete THILE Change Addition TIME NAMI NAME STREET ADDRESS STREE LADDRESS CHY-S1-ZIP CHY ST 7P Change Delete HITE ☐ Addition NAME MARKE STREET ADDRESS STREET ADDRESS

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.

CHY SI-ZIP

CITY - ST- 7IP

SIGNATURE: Rev. Harry Whipple

HARRY WHIPPLE 2/12/07 863-699-9700

FILED