2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003745

FILED Jan 23, 2008 Secretary of State

Entity Name: BETHEL BAPTIST CHURCH OF LAKE PLACID, INC.

Current Principal Place of Business: New Principal Place of Business:

216 EAST PARK STREET LAKE PLACID, FL 33852

Current Mailing Address: New Mailing Address:

216 EAST PARK STREET LAKE PLACID, FL 33852

FEI Number: 03-0443626 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WHIPPLE, HARRY W
2420 NORTH PRIMROSE ROAD
AVON PARK, FL 33825 US

KNICKERBOCKER, LUKE T
6 HERSHEY LANE
LAKE PLACID, FL 33852 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: LUKE T. KNICKERBOCKER 01/23/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD () Delete Title: SD (X) Change () Addition Name: RILEY, DONALD Name: RILEY, DONALD

Address: 814 WESTERN BLVD Address: 814 WESTERN BLVD
City-St-Zip: LAKE PLACID, FL 33852 City-St-Zip: LAKE PLACID, FL 33852 US

Title: PD () Delete Title: PD (X) Change () Addition
Name: WHIPPLE, HARRY Name: KNICKERBOCKER, LUKE T
Address: 2420 N PRIMROSE RD Address: 6 HERSHEY LANE

 Address:
 2420 N PRIMROSE RD
 Address:
 6 HERSHEY LANE

 City-St-Zip:
 AVON PARK, FL 33825
 City-St-Zip:
 LAKE PLACID, FL 33852 US

Title: TD () Delete Title: TD (X) Change () Addition Name: HARGRAVES, CLAY Name: DYE, THOMAS

 Address:
 501 CHELSEE WY
 Address:
 7001 OLD PLANTATION ROAD

 City-St-Zip:
 LAKE PLACID, FL 33852
 City-St-Zip:
 SEBRING, FL 33876 US

Title: () Delete Title: TD () Change (X) Addition

 Name:
 Name:
 RAMOS, ABEL

 Address:
 Address:
 4608 STARFISH AVE

 City-St-Zip:
 City-St-Zip:
 SEBRING, FL 33870 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LUKE T. KNICKERBOCKER PD 01/23/2008