

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 07, 2008 8:00 am
Secretary of State

04-07-2008 90065 021 ****61.25

DOCUMENT # N25874

1. Entity Name
**BEULAH HILL MISSIONARY BAPTIST CHURCH OF
GRETNA, INC.**



Principal Place of Business
**P.O. BOX 418
MAIN ST. HWY 90 W.
GRETNA, FL 32332-0418**

Mailing Address
**P.O. BOX 418
MAIN ST. HWY 90 W.
GRETNA, FL 32332-0418**

40061880



04062008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1901454

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**GRANT, HENRY G.
4411 GLORY RD
GRETNA, FL 32332-0122**

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME CARTER, MATTHEW M
STREET ADDRESS 1904-6 MICCOSUKEE ROAD
CITY-ST-ZIP TALLAHASSEE, FL 32308

TITLE VD
NAME GRANT, HENRY G
STREET ADDRESS 4411 GLORY ROAD
CITY-ST-ZIP GRETNA, FL 32332

TITLE S
NAME BARKLEY, JAWAND J
STREET ADDRESS POST OFFICE BOX 16
CITY-ST-ZIP GRETNA, FL 32332

TITLE T
NAME SMITH, WALTER JR
STREET ADDRESS P O BOX 541
CITY-ST-ZIP GRETNA, FL 32332

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Henry G. Grant Vice President 4/7/08 (850) 875-7255