

FLORIDA DEPARTMENT 🗩 STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N34682

1. Corporation Name

BETH JUDAH MESSIANIC CONGREGATION INCORPORATED

Principal Place of Business P O BOX 132011 ORMOND ENCH FL 32173

Mailing Andress
P O BOX 100011
ORMOND JEACH FL 32173

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA



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BICHARDS, DENNIS 28 FOREST VIEW WAY ORMOND BEACH FL 32174  11. Pursuant to the provision/of Section 517.0502 and 617.1506. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered office or registered of the provision of Section 517.0502 and 617.1506. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered of the purpose of the State of Provise Section 1975 and the purpose of the purpose of changing its registered office of the purpose of the purpose of changing its registered office of the purpose of the purpose of changing its registered office of the purpose of the purpose of changing its registered of the purpose of the purpose of changing its registered of the purpose of the purpose of changing its registered of the purpose of changing its registered of the purpose of the purpose of changing its registered of the purpose of ch	23 OR	lmond Bch FL.		<del></del>	5. Certificate of Status Desired		
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11. Pursuant to the provisions of Section 6 517, 1508, Florida Statutes, the above-named corporation about 15 the purpose of changing its registered online or registered again of both of the State of Florida, Such change was authorized by the corporations. In herby accept the appointment as registered online or registered again and the provisions of the State of Florida, Statutes.  SIGNATURE  BENNATURE  12. OFFICERS AND DIRECTORS. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TILE  T	26 FORES	ST VIEW WAY		82 Street Address (P.O. Box Number is Not Acceptable) 83			
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14. 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		artify that the information execution with	this filing does not qualify for the		In Section 110 07/3/() Florid- State to 1 5 dis-	May the lefa-	

Indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under that I am an officer or director of the corporation or the receiver or trustee empowered to execute his report as required by Chapter 617. Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or of an attachment with an address, with all other like empowered.

GNATURE:

| CONTINUE AND TYPED ON PRINTED NAME OF BIOLOGY OF DIRECTOR
| Dayline Phone is | Dayline Phon

SIGNATURE: