

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34682

FILED
Jan 17, 2009
Secretary of State

Entity Name: BETH JUDAH MESSIANIC CONGREGATION INCORPORATED

Current Principal Place of Business:

3217 STATE ROAD 40
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

3217 STATE ROAD 40
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: 59-2927723 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, JERRY
3217 S.R. 40
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WYATT, WILLIAM
Address: 150 FORRESTER PL
City-St-Zip: PALM COAST, FL 32137

Title: TD () Delete
Name: MCKINNEY, DOUG
Address: 1906 CAROLINA AVE
City-St-Zip: ORMOND BEACH, FL 32174

Title: PD () Delete
Name: GINSBURG, KEITH
Address: 913 WOODMERE CIR
City-St-Zip: ORMOND BEACH, FL 32174

Title: D () Delete
Name: VUCKOVICH, GEORGE
Address: 4104 PIUTE LANE
City-St-Zip: ORMOND BEACH, FL 32174

Title: D () Delete
Name: SANDFORD, AUDREY
Address: 541 GREEN SPRING CIR
City-St-Zip: WINTER SPRINGS, FL 32708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: KEITH GINSBURG

DIR

01/17/2009

Electronic Signature of Signing Officer or Director

_____ Date