## 2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## Jul 28, 2003 8:00 am **Secretary of State** DOCUMENT # **N51399** 1. Entity Name 07-28-2003 90141 020 \*\*\*\*61.25 BETHEL HOUSE OF GOD CHURCH, INC. Principal Place of Business Mailing Address 516 N W 4TH AVE 516 N W 4TH AVE HALLANDALE FL 33009-3310 HALLANDALE FL 33009-3310 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number NOT APPLICABLE Not Applicable Zip Country Ζip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JOHNSON, STEPHEN E Street Address (P.O. Box Number is Not Acceptable) ----518 NW-4TH-AVENUE HALLANDALE FL 33009 City Zip Code this statement of the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept 8. The above named entity the obligations of regist Stephen Johnson 7/15/03 SIGNATURE registered agent and title if applicable FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to After September 10, 2003, min will be \$236.25 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE TITLE Change Addition Delete Johnson, Stephen E NAME NAME STREET ADDRESS 516 N.W. 4TH AVE STREET ADDRESS CITY-ST-ZIP HALLANDALE FL 33009 CITY-ST-ZIP Tan ya Mays TITLE Delete TITLE Change ☐ Addition MCGHEE, HENRY NAME NAME 4267 NW 42nd Term 13701 SW 12TH ST #SULFOLK A113 STREET ADDRESS STREET ADDRESS Coconuct creek, FL 33073 CITY-ST-ZIP PEMBROKE PINES FL 33029 CITY-ST-ZIP Addition TITLE Delete TITLE Change HEPBURN, VENICE NAME NAME 3199 FOXCROFT RD., #112 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIRAMAR FL 33025 CITY-ST-ZIP Change Delete TITLE TITLE ☐ Addition Mario Lavette 6545 SW 2157 Street MCINTOSH, BERESFORD NAME NAME STREET ADDRESS 4560 NW 10TH PL APT #G106 STREET ADDRESS miramar, FL 33023 CITY-ST-7IE PLANTATION FL 33313 CITY-ST-ZIP **C**hange ☐ Addition TITLE Peter Clarke TITLE Delete 6115 NW 186 Stree # 210 FOSTER, GLORIA NAME NAME STREET ADDRESS 3435 S.W. 52ND AVE STREET ADDRESS Mianu FL 33015 CITY-ST-ZIP PEMBROKE PARK FL 33023 CITY-ST-ZIP TITI F ☐ Delete TITLE . Change ☐ Addition NAME

12. Thereby 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 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 employered 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 other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: Estephen Johnson

STREET ADDRESS

CITY-ST-ZIP