2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000899

FILED Apr 18, 2005 Secretary of State

Entity Name: THE BETHEL COMMUNITY DEVELOPMENT CORPORATION OF TALLAHASSEE, FLORIDA, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
501 W. OF	. AME CHURC RANGE AVE SSEE, FL 323			
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
501 W. OF	. AME CHURC RANGE AVE SSEE, FL 323			
El Number:	: 59-3301835	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
TALLAHAS	ORANGE AV SSEE, FL 323	10 US	ourpose of changing its registere	ed office or registered agent, or both,
	e of Florida.			
n the State				
n the State	RE:	ic Signature of Registered Ag	ent	Date
n the State	RE:			Date BES TO OFFICERS AND DIRECTOR:
n the State	RE: Electron S AND DIREC	TORS: Delete F I CIR		
n the State SIGNATUF DFFICERS Title: Name: Address:	RE: Electron S AND DIREC PD () GREEN, JOHN 130 COTILLION TALLAHASSEE	Delete F I CIR , FL 32312 Delete CURTIS E ST.	ADDITIONS/CHANG Title: Name: Address:	SES TO OFFICERS AND DIRECTOR
n the State BIGNATUF DFFICERS Title: lame: kddress: City-St-Zip: Title: lame: kddress:	Electron S AND DIREC PD () GREEN, JOHN 130 COTILLION TALLAHASSEE VP () RICHARDSON, 533 TUSKESEE TALLAHASSEE	Delete F I CIR , FL 32312 Delete CURTIS E ST. , FL 32310 Delete RLEY LWOOD DR	ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	SES TO OFFICERS AND DIRECTOR:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOHN F GREEN PD 04/18/2005