

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000006644

**FILED**  
**Apr 30, 2021**  
**Secretary of State**  
**3670506990CC**

**Entity Name:** BETHLEHEM MISSIONARY BAPTIST CHURCH OF TITUSVILLE,  
FLORIDA, INC.

**Current Principal Place of Business:**

811 DUMMITT AVENUE  
TITUSVILLE, FL 32780

**Current Mailing Address:**

811 DUMMITT AVENUE  
TITUSVILLE, FL 32780 US

**FEI Number: 59-3542178**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

FAISON, WILLIE  
811 DUMMITT AVENUE  
TITUSVILLE, FL 32780 US

*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

**Officer/Director Detail :**

Title DEACON  
Name HAYES, DEODIES JR  
Address 809 BOOKER STREET  
City-State-Zip: TITUSVILLE FL 32780

Title DEACON  
Name EDMONSON, RUFUS  
Address 1685 THORTON AVE,  
City-State-Zip: TITUSVILLE FL 32780

Title DEACON  
Name ROBINSON, CORY  
Address 2540 NOTTINGHAM ST.  
City-State-Zip: TITUSVILLE FL 32796

Title CHAIRMAN OF TRUSTEES  
Name FAISON, WILLIE BERNARD  
Address 801 DUMMITT AVE  
City-State-Zip: TITUSVILLE FL 32780

Title VICE CHAIRMAN OF TRUSTEES  
Name MURRAY, JAMES  
Address 945 GIBSON ST  
City-State-Zip: TITUSVILLE FL 32780

*I hereby 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 all other like empowered.*

**SIGNATURE: WILLIE B. FAISON**

**CHAIRMAN OF TRUSTEES 04/30/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date