

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000001870

Entity Name: BETHANY MINISTY OF GOD, INC.**Current Principal Place of Business:**1350 SOUTH DIXIE HWY SUITE 13W
POMPANO BCH, FL 33069**Current Mailing Address:**1900 NE 2ND TERRACE
POMPANO BCH, FL 33060**FEI Number:** 61-1591614**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BENOIT, CLAUDETTE
1900 N.E 2ND TERRACE
POMPANO BEACH, FL 33060 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	PD
Name	BENOIT, CLAUDETTE
Address	1900 NE 2ND TERR.
City-State-Zip:	POMPANO BCH FL 33060

Title	AVD
Name	FEVRIUS, SONIA
Address	1901 NE 2ND TERR., #2
City-State-Zip:	POMPANO BCH FL 33060

Title	T
Name	PAUL, ALBERT
Address	3015 NW 6TH CT.
City-State-Zip:	POMPANO BCH FL 33069

Title	VD
Name	ATKINS, WALTER E
Address	3015 NW 6TH CT.
City-State-Zip:	POMPANO BCH FL 33069

Title	SD
Name	BENOIT, MARTIN
Address	1900 NE 2ND TERR.
City-State-Zip:	POMPANO BCH FL 33060

Title	AT
Name	MERCIDIEU, AUGUST
Address	320 NE 1ST ST.
City-State-Zip:	POMPANO BCH FL 33060

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: CLAUDETTE BENOIT**OWNER****04/27/2019**

Electronic Signature of Signing Officer/Director Detail

Date