

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000006705

Entity Name: NEW BETHEL MISSIONARY BAPTIST CHURCH OF LAKE CITY,
FLORIDA, INCORPORATED**FILED**
Jun 18, 2019
Secretary of State
6982028090CC**Current Principal Place of Business:**550 NW MARTIN LUTHER KING STREET
LAKE CITY, FL 32055**Current Mailing Address:**POST OFFICE BOX 807
LAKE CITY, FL 32056**FEI Number: 82-4709300****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**GEORGE, BERNARD
183 NW BASCOM NORRIS DR
LAKE CITY, FL 32055 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 BAKER, ALVIN J
Address 999 NW ZACK DRIVE
City-State-Zip: LAKE CITY FL 32055Title VD
Name KELLY, NARVELL
Address 241 SW PRESLEY TERRACE
City-State-Zip: LAKE CITY FL 32025Title VD
Name PERRY, EARL
Address 360 SW HOPE HENRY STREET
City-State-Zip: LAKE CITY FL 32024Title SD
Name COMBS, MARGO
Address 292 NE WASHINGTON STREET
City-State-Zip: LAKE CITY FL 32024Title TD
Name OLIVER, ALBERT
Address 936 NW LAKE JEFFREY ROAD
City-State-Zip: LAKE CITY FL 32055Title T
Name GEORGE, BERNARD
Address 183 NW BASCOM NORRIS DR
City-State-Zip: LAKE CITY FL 32055

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: ALVIN BAKER**PASTOR****06/18/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date