

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 13, 2007 08:00 AM
Secretary of State

DOCUMENT # 704896

1. Entity Name
**BETHANY EVANGELICAL COVENANT CHURCH OF
MIAMI, FLORIDA, INC.**



Principal Place of Business
**125 N.E. 119TH STREET
N. MIAMI, FL 33161**

Mailing Address
**125 N.E. 119TH STREET
N. MIAMI, FL 33161**



04102007 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-0977823

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**FERGUSON, GARNETT
13681 S BISCAYNE RIVER DRIVE
MIAMI, FL 33161**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	C FERGUSON, S. ANNETTE 13681 S BISCAYNE RIVER DRIVE MIAMI, FL 33161
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C SETZER, MIKE 10670 SW 23 STREET DAVIE, FL 33324
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FERGUSON, GARNETTE G 13681 S BISCAYNE RIVER DRIVE MIAMI, FL 33161
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SETZER, ARLENE 10670 SW 23 STREET DAVIE, FL 33324
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD JANSSON-DIEM, ELIZABETH 2999 POINT EAST DRIVE, # C-610 AVENTURA, FL 33160
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000705104
04/23/07-80037-024 61.25

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 empowered 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 an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GARNETT S. FERGUSON *Treasurer*
April 10, 2007 *305-685-1955*

Date Daytime Phone #