

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 708686

1. Entity Name
BEULAH BAPTIST CHURCH OF LITHIA, FLORIDA, INC.



Principal Place of Business
5300 BEULAH CHURCH ROAD
LITHIA FLA, 33547

Mailing Address
PO BOX 327
NICHOLS, FL 33863-0327

FILED
Jan 29, 2004 08:00 AM
Secretary of State



01082004 No Chg-NP CR2E037 (10/03)

4. FEI Number
59-2617614

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

COOK, VERNON
2840 NICHOLS RD.
LITHIA, FL 33547

**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, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	S
NAME	SOUTHWELL, CHARLES A
STREET ADDRESS	CAROLINA AVE
CITY-ST-ZIP	MULBERRY, FL 33860
TITLE	D
NAME	COOK, VERNON
STREET ADDRESS	2840 NICHOLAS RD.
CITY-ST-ZIP	LITHIA, FL 33547
TITLE	PD
NAME	COLEMAN, GEORGE L
STREET ADDRESS	9402 COUNTY LINE RD
CITY-ST-ZIP	LITHIA, FL 33547
TITLE	TD
NAME	HARRISON, ELBARAE
STREET ADDRESS	11809 LITHIA-PINECREST
CITY-ST-ZIP	LITHIA, FL 33547
TITLE	D
NAME	HALL, GERALD
STREET ADDRESS	8902 PRITCHER ROAD
CITY-ST-ZIP	LITHIA, FL 33547
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000020173
01/29/04-80053-023 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

Elbarae Harrison - Elbarae HARRISON

1-21-04 813-737-2190

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #