2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709514

FILED Apr 13, 2009 Secretary of State

Entity Name: BETHANY BAPTIST CHURCH, INC. OF PLANT CITY, FLORIDA

Current Principal Place of Business: New Principal Place of Business:

3409 N. CORK ROAD PLANT CITY, FL 33565

Current Mailing Address: New Mailing Address:

3409 N. CORK ROAD PLANT CITY, FL 33565

FEI Number: 59-1115091 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

REDMAN, JAMES L

121 N. COLLINS STREET
PLANT CITY, FL 33566 US

COTON, DANIEL
121 N. COLLINS STREET
PLANT CITY, FL 33566 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: DANIEL COTON 04/13/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD () Delete Title: D (X) Change () Addition Name: MANNING, BRUCE Name: MANNING, BRUCE

 Address:
 3806 BRUTON RD.
 Address:
 3806 BRUTON RD.

 City-St-Zip:
 PLANT CITY, FL 33565
 City-St-Zip:
 PLANT CITY, FL 33565

Title: D () Delete Title: CD (X) Change () Addition Name: SIMPSON, RICHARD Name: SIMPSON, RICHARD

Address: 3012 LEILA ESTELLE DR Address: 3012 LEILA ESTELLE DR City-St-Zip: PLANT CITY, FL 33565 City-St-Zip: PLANT CITY, FL 33565

Title: DT () Delete Title: DT (X) Change () Addition

 Name:
 LOTT, DEBBIE
 Name:
 LOTT, DEBBIE

 Address:
 3806 BRUTON RD
 Address:
 PO BOX 1774

City-St-Zip: PLANT CITY, FL 33565 City-St-Zip: PLANT CITY, FL 33564

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DEBBIE LOTT DT 04/13/2009