

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713243

FILED
May 14, 2009
Secretary of State

Entity Name: BETHEL AFRICAN METHODIST EPISCOPAL CHURCH OF POMPANO BEACH, FLORIDA,
INCORPORATED

Current Principal Place of Business:

405 NW 3RD AVENUE
POMPANO BEACH, FL 33060 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2151
POMPANO BEACH, FL 33061

New Mailing Address:

FEI Number: 59-2211765 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MCCRAY, JOHNNY L JR
400 E ATLANTIC BLVD
POMPANO BEACH, FL 33060 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FRACNSICO, T. R REV
Address: 301 NW 19TH STREET
City-St-Zip: POMPANO BEACH, FL 33060

Title: VD () Delete
Name: MITCHELL, RONALD SR.
Address: 424 NW 19TH ST
City-St-Zip: POMPANO BCH, FL 33060

Title: V () Delete
Name: SWORN, SAMUEL
Address: 1508 N.W. 3RD.WAY
City-St-Zip: POMPANO BEACH, FL 33060

Title: S () Delete
Name: GILLIS, KATHRYN
Address: 220 NW 15TH PLACE
City-St-Zip: POMPANO BEACH, FL 33060

Title: D () Delete
Name: ALBERT, HELEN
Address: 3451 N.W. 5TH PLACE
City-St-Zip: FT. LAUDERDALE, FL 33311

Title: D () Delete
Name: COOPER, CHERIAN
Address: 222 N.W. 10TH AVE.
City-St-Zip: POMPANO BEACH, FL 33060

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: KATHERYN GILLIS

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05/14/2009

Electronic Signature of Signing Officer or Director

Date