FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 714413

1. Corporation Name

BETHESDA BAPTIST CHURCH, INC.

Principal Place of B	usine
2810 FORDHAM ROA	AD NE
DALLE DAY DE 20000	•

2. Principal Place of Business

Suite, Apt. #, etc.

City & State .

Mailing Address

2810 FORDHAM ROAD NE PALM BAY FL 32905

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

28

FILED Feb 10, 1999 8:00am Secretary of State

02-10-1999 90035 018 ****61.25

((00)(): (00 0)((1 0 () 0 (0)	E OTO DE LIBERT CHE OTOTA A	ERIE REREC REREC BURNER BURNE

3. Date Incorporated or Qualifed

5. Certifcate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

04/09/1968

71-4413151

4. FEI Number

4	25	[29]	30]			40 Name and	Address of New R	egletered (Agent	
	9. Name and Address of Curren	t Registered Agent		041		10. Name and	Audiess of New IV	agiatorea ,	180.11	
				81	Name	• .	· · · · · · · · · · · · · · · · · · ·		·.	
KISH, ERN	ieet i			82	Street Addre	ess (P.O. Box Nun	nber is Not Accepta	ble)		
				-	0	-"		<u> </u>	·	
	PHER ST NE			83					•	.
PALM BAY	FL 32905			Ш_					Jos Jan C.	
				84	City		•	FL	85 Zip Co	DOB
<u> </u>	to the provisions of Sections 617.050	- interior Electric	d-dutas the s	1	named com	oration submits thi	s statement for the	numose of	changing its r	egistered
					e corporation	on's board of direct	tors. I hereby accep	t the appoi	itment as reg	stered
agent. I a	m familiar with, and accept the obliga	tions of, Section 617.0503	, Florida Stat	utes.		47.4.5	1. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	119 5(*)) 511	1. 養傷 1. 名 1. 4 4 4 7 11	3(2) (65)
SIGNATURE					_					
SIGNATURE	Signature, typed or printed name of registered agen			Agent s	ignature required	d when reinstating)	CHANGES TO OFF	DATE	D DIRECTOR	2S IN 12
12.	OFFICERS AN	D DIRECTORS	13.				·	TOERS AN	Change	Addition
TITLE	DC	☐ DELET	E 1.1 T	TLE	1		•:,	•	Change	
NAME	KISH, ERNEST J		1.2 N	AME					•	
STREET ADDRESS	1173 SCYPHER ST NE		1.3 \$	TREET A	DDRESS	÷, , ţ	i\$γ.		•	
	PALM BAY FL		1.4 C	TY-ST-	ZIP .				<u> </u>	
CITY-ST-ZIP TITLE	TD	☐ DELE1	TE 2.1 TI	TLE	1-				Change	Addition
	·-		22 N	AME				·	• • • •	
NAME	KISH, ETHEL P.				DDRESS	•				.
STREET ADDRESS	I		1		ì					
CITY-ST-ZIP	PALM BAY FL	□ DELET		TY-ST-	-ДР	 -			Change	Addition
TITLE	SD	☐ OECE								1
NAME	YANIK, JEAN		3.2 N							
STREET ADDRESS	2850 KOSSUTH RD NE		3.3 \$	TREETA	VDORESS !				٠.	
CITY-ST-ZÍP	PALM BAY FL 32905			TY-ST-	- ZIP				Change	Addition
TITLE		☐ DEFE.	TE 4.1 T	ITLE				•	Cliquige	П частоп
NAME			4.21	AME		٠, , ,		:	69 J. 344 4150	erang:
STREET ADDRESS			4.3 S	TREET	ADDRESS				五字 網	
CITY-ST-ZIP	·		4.4 0	ITY-ST-	ZIP _	•		1.410 (1. 1 .)	(A) 经基础	1 1 1 1 1 1
TITLE		☐ DELE	TE 5.1 T	ITLE					☐ Change	Addition
NAME		_	5.2 N	IAME						
		•	5.3 S	TREET	ADDRESS					·
STREET ADDRESS	line.		5.4 0	:ITY-ST-	ZIP					, '
CITY-ST-ZIP		☐ DELE							. Change	☐ Addition
TITLE	To the second			IAME			**		•	
NAME	1 1 7 4 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1				ADDRESS					1
STREET ADDRESS					[•			
CITY-ST-ZIP				TY-ST-		6	:\ Elecido Statutos	I further co	rtify that the in	ntormation
14. I hereby	certify that the information supplied w	ith this filing does not qua	lify for the ex	emptio	on stated in	Section 119.07(3)(i), Fiorida Statutes.	f mode une	lor oath: that I	am an

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE

NATIONAL DESCRIPTION OF SIGNING OFFICER OR DIRECTOR

1/18/94 407-723-7727 Daylime Phone # 3R2E037 (11/98

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable