

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715104

FILED
Apr 30, 2009
Secretary of State

Entity Name: NEW BETHEL MISSIONARY BAPTIST CHURCH OF SARASOTA, INC.

Current Principal Place of Business:

2504 GILLESPIE AVE
SARASOTA, FL 34234 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 1988
SARASOTA, FL 34230 US

New Mailing Address:

FEI Number: 59-2521654

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUBOSE, E. KEITH
4696 DEL SOL BLVD
SARASOTA, FL 34243 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: PCD () Delete
Name: DUBOSE, E. KEITH
Address: 4696 DEL SOL BLVD.
City-St-Zip: SARASOTA, FL 34243

Title: TD () Delete
Name: HARRIS, RAWLEY JR
Address: 4002 LANCASTER DR
City-St-Zip: SARASOTA, FL 34241

Title: D () Delete
Name: RUDOLPH CARTER
Address: 2493 22ND STREET
City-St-Zip: SARASOTA, FL 34234

Title: D () Delete
Name: JONES, FREDDIE
Address: 1245 14TH STREET
City-St-Zip: SARASOTA, FL 34234

Title: S () Delete
Name: ZENON, KIMBERLAIN
Address: 14969 AMBERJACK TERRACE
City-St-Zip: BRADENTON, FL 34202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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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: E. KEITH DUBOSE

PCD

04/30/2009

Electronic Signature of Signing Officer or Director

Date