2006 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT DOCUMENT #717737 1. Entity Name OCALA BETHLEHEM BAPTIST CHURCH, INC. Principal Place of Business Mailing Address 7110 NW 90TH AVENUE 8750 W HWY. 326

FILED Jul 27, 2006 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

OCALA, FL 34482

07202006 No Chg-NP CR2E037 (4/06)

4. FEI Number	•			Applied For
23-7371656				Not Applicable
5. Certificate of Status Desired		\$8.7	-	Additional

6. Name and Address of Current Registered Agent

DAVIS, OTIS 7110 N.W. 90TH AVENUE OCALA, FL 34482

the obligations of registered agent.

SIGNATURE:

OCALA, FL 34482

DO NOT WRITE IN THIS SPACE

SIGNATURE.	Signature, typed or printed name of registered agent and title	f applicable. (NOTE: Registered	Agent signature	required when rematating)		DATE			
D	Filing Fee is \$61.25 ue by September 6, 2006	9. Election Campaign Finan Trust Fund Contribution	cing	\$5.00 May Be Added to Fees	U0 07/27	00005724 706-8000	20 15-004	61.25	
10.	OFFICERS AND DIREC	CTORS	13 - 51 km	* 3* + 4 a = 11 = 02	359 J. B. J. A.				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DAVIS, OTIS 7110 NW 90TH AVE OCALA, FL								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOLT, HAROLD 4555 NW 80TH PL OCALA, FL								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIS, WILLIAM 1811 SW 4TH ST OCALA, FL			DO	NOT	WRIT	E		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JONES, ODELL 7463 NW HWY 326 OCALA, FL			İN	THIS	SPAC	E		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BRADSHAW, SAUNDRA 10270 NW 63RD ST OCALA, FL								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BLUNT, JOHNNIE B. 7388 W. HWY 326 OCALA, FL								
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.									

YPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

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