

FILE NOW: FILING FEE IS \$61.25

FILED
Mar 17, 1999 8:00 am
Secretary of State

03-17-1999 90154 002 ****70.00

NONPROFIT CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 728234

1. Corporation Name
GREATER ISRAEL BETHEL PRIMITIVE BAPTIST CHURCH

Principal Place of Business
160 NORTHWEST 18TH ST.
MIAMI FL 33136-1718

Mailing Address
160 NORTHWEST 18TH ST
MIAMI FL 33136-1718



2. Principal Place of Business 2a. Mailing Address 3. Date Incorporated or Qualified
21 26 01/08/1974
Suite, Apt. #, etc. 4. FEI Number Applied For
22 27 59-1689749 Not Applicable
City & State 5. Certificate of Status Desired \$8.75 Additional Fee Required
23 28
Zip Country 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
24 25 29 30

9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent
BIVENS, ERNEST J.
5617 WASHINGTON STREET
SUITE 62E
HOLLYWOOD FL 33023
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FLOYD, GREGORY L	1 2 NAME	
STREET ADDRESS	19700 NW 12TH CT	1 3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33169	1 4 CITY-ST-ZIP	
TITLE	PD <input checked="" type="checkbox"/> DELETE	2 1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GALLOWAY, O. G.	2 2 NAME	P. D.
STREET ADDRESS	1100 N W 50TH STREET	2 3 STREET ADDRESS	WASHINGTON, KENNETH L.
CITY-ST-ZIP	MIAMI, FL 0	2 4 CITY-ST-ZIP	16501 N.W. 23RD COURT MIAMI, FLORIDA 33054
TITLE	SD <input checked="" type="checkbox"/> DELETE	3 1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ALVIN, EDITH	3 2 NAME	S.
STREET ADDRESS	285 NW 51ST STREET	3 3 STREET ADDRESS	BARBARA BURCH
CITY-ST-ZIP	MIAMI FL	3 4 CITY-ST-ZIP	1824 N.W. 5TH PLACE MIAMI, FLORIDA 33136
TITLE	T <input type="checkbox"/> DELETE	4 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DUHART, BARTOW JR	4 2 NAME	
STREET ADDRESS	9120 NW 13TH AVE	4 3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	4 4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	5 1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILCOX, THELMA	5 2 NAME	S. D.
STREET ADDRESS	2000 NW 119TH STREET SUITE 923	5 3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	5 4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6 2 NAME	
STREET ADDRESS		6 3 STREET ADDRESS	
CITY-ST-ZIP		6 4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Thelma Wilcox* 3/14/99
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (11/98)