

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728234

FILED  
Feb 27, 2008  
Secretary of State

**Entity Name:** GREATER ISRAEL BETHEL PRIMITIVE BAPTIST CHURCH

**Current Principal Place of Business:**

160 NORTHWEST 18TH ST.  
MIAMI, FL 331361718

**New Principal Place of Business:**

**Current Mailing Address:**

160 NORTHWEST 18TH ST.  
MIAMI, FL 331361718

**New Mailing Address:**

**FEI Number:** 59-1689749

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BIVENS, ERNEST J.  
16121 NW 17TH PLACE  
MIAMI, FL 33054 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: D ( ) Delete  
Name: SCOTT, WILLIE  
Address: 1920 NW 115TH ST  
City-St-Zip: MIAMI, FL 33167

Title: PD ( ) Delete  
Name: WASHINGTON, KENNETH L  
Address: 16501 NW 23RD CT  
City-St-Zip: MIAMI, FL

Title: S ( ) Delete  
Name: PLA, HELEN  
Address: 17520 NW 10TH CT  
City-St-Zip: MIAMI, FL 33169

Title: S ( ) Delete  
Name: WILCOX, THELMA  
Address: 2000 NW 119TH ST, # 923  
City-St-Zip: MIAMI, FL 33167

Title: T ( ) Delete  
Name: BIVENS, ERNEST J  
Address: 16121 NW 17TH PL  
City-St-Zip: MIAMI GARDENS, FL 33054

**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  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: MILLER, GRADY L  
Address: 1045 N.W. 129TH STREET  
City-St-Zip: NORTH MIAMI, FL 33168

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: W.L. WASHINGTON

PD

02/27/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date