

FILE NOW: FILING FEE IS \$61.25

FILED

**Apr 07 1997 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 735403 (8)

1. Corporation Name
BETHEL BAPTIST CHURCH OF BRANDON, INC.

Principal Place of Business 1801 SOUTH MILLER ROAD VALRICO FL 33594	Mailing Address 1801 SOUTH MILLER ROAD VALRICO FL 33594-5702
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21 2. Principal Place of Business Suite, Apt. #, etc.	26 2a. Mailing Address Suite, Apt. #, etc.
22 22. City & State	27 27. City & State
23 23. Zip 25 25. Country	28 28. Zip 30 30. Country

3. Date Incorporated or Qualified 03/26/1976	3a. Date of Last Report 04/18/1996
4. FEI Number 59-2254021	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**GOLDEN, DALE
427 SILVERHILL DR
VALRICO FL 33594**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number Is Not Acceptable)
83
84 City
85 Zip Code

FL

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	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GOLDEN, DALE	1.2 NAME	D Pitinger, Thomas
STREET ADDRESS	427 SILVERHILL DR	1.3 STREET ADDRESS	890 Blankenship Rd.
CITY-ST-ZIP	VALRICO, FL 00000	1.4 CITY-ST-ZIP	Dover, FL 33527
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GREEN, DAVID	2.2 NAME	D Surfus, Thomas
STREET ADDRESS	3906 NORTHRIDGE DRIVE	2.3 STREET ADDRESS	1023 Greenbriar Dr.
CITY-ST-ZIP	VALRICO FL	2.4 CITY-ST-ZIP	Brandon, FL 33511
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SILL, RONALD	3.2 NAME	
STREET ADDRESS	2063 SARAH LOUISE DR	3.3 STREET ADDRESS	
CITY-ST-ZIP	BRANDON FL	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ELLIS, CHARLES	4.2 NAME	
STREET ADDRESS	3845 GARNET DR	4.3 STREET ADDRESS	
CITY-ST-ZIP	MULBERRY FL	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		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	700002136767
STREET ADDRESS		6.3 STREET ADDRESS	-04/08/97--01075--019
CITY-ST-ZIP		6.4 CITY-ST-ZIP	***61.25

14. I do 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.

SIGNATURE: David R. Green **DAVID R. GREEN** Date: 8-13-97 813-681-7642
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone # 0046680

2E037 (9/96)