

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740071

FILED
May 27, 2009
Secretary of State

Entity Name: BETHANY BAPTIST CHURCH OF MIAMI, INC.

Current Principal Place of Business:

787 NW 54TH ST.
MIAMI, FL 33127 US

New Principal Place of Business:

Current Mailing Address:

787 NW 54TH ST.
MIAMI, FL 33127 US

New Mailing Address:

FEI Number: 59-1914581 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PIERRE, VOLCE
1822 NW 34ST
MIAMI, FL 33142 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: PD () Delete
Name: AUGUSTE, SALIM PASTOR
Address: 1970 NE 159TH STREET
City-St-Zip: MIAMI, FL 33162 US

Title: D () Delete
Name: NOELLISTE, YVAN
Address: 12000 NE 16 AVE D-402
City-St-Zip: MIAMI, FL 33161 US

Title: SD () Delete
Name: VALBRUN, JOSEPH
Address: 12404 NE 1ST AVENUE
City-St-Zip: N. MIAMI, FL 33161 US

Title: ASD () Delete
Name: LOUIS, JOSEPH W
Address: 15744 NE 11 COURT
City-St-Zip: N. MIAMI BEACH, FL 33162 US

Title: TD () Delete
Name: REMY, ANDRE
Address: 120 NE 170 STREET
City-St-Zip: MIAMI, FL 33162 US

Title: ATD () Delete
Name: OTHELOT, ESTIME
Address: 15321 NE 10TH AVE
City-St-Zip: MIAMI, FL 33162 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: NOELLISTE, YVAN
Address: 2460 SW 52 STREET
City-St-Zip: DANIA BEACH, FL 33312 US

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:

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: SALIM AUGUSTE

PD

05/27/2009

Electronic Signature of Signing Officer or Director

Date