

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744459

FILED
Mar 02, 2011
Secretary of State

Entity Name: BETHEL A.M.E. CHURCH OF NAPLES, INC.

Current Principal Place of Business:

2935 64TH STREET SOUTHWEST
NAPLES, FL 341057315

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 11975
NAPLES, FL 341012975

New Mailing Address:

FEI Number: 59-1893662

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WRIGHT, ROZALYNE P
8359 LAUREL LAKES BLVD..
NAPLES, FL 34119 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
Name: LEEOMIA W. KELLY .
Address: 100 GOLDEN ISLES, DR P.H.6
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: STW
Name: CARSON, HELEN
Address: 3390 MYSTIC RIVER DR
City-St-Zip: NAPLES, FL 34120

Title: TRU
Name: WILLIAMS, MARCIA
Address: 1240 WILDWOOD LAKES BLVD. #207
City-St-Zip: NAPLES, FL 34104

Title: MEMB
Name: BELL, LAUREN
Address: 2820 28TH AVE SE
City-St-Zip: NAPLES, FL 34117

Title: TRD
Name: WRIGHT, ROZALYNE P
Address: 8359 LAUREL LAKES BLVD.
City-St-Zip: NAPLES, FL 34119

Title: MEMB
Name: JOAN HARPER
Address: 7776 TARA CT
City-St-Zip: NAPLES, FL 34104

I hereby 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 all other like empowered.

SIGNATURE: JOAN HARPER

TREA

03/02/2011

Electronic Signature of Signing Officer or Director

Date