**NONPROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Feb 22, 1999 8:00 am Secretary of State

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DOC	JMENT	# 7	4972	4

1. Corporation Name

THE BETHEL ASSEMBLY OF GOD CHURCH OF GREENSBORO.

Principal Place of Business

Mailing Address COLINTY DO 260

COUNTY HD. 203 RT 1 BOX 286 B OUINCY FL 32351	RT 1 BOX 286 B QUINCY FL 32351	
		·

21	Principal Place of Business	26	Mailing Address		11/08/1979	
	Suite, Apt. #, etc.	Τ,	Suite, Apt. #, etc.		4. FEI Number Applied For	
22		27			<b>59-2240761</b> Not Applicable	
23	City & State	28	City & State		5. Certifcate of Status Desired	
24	Zip Country	29	Zip Country	,	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
24	9. Name and Address of Currer				10. Name and Address of New Registered Agent	
SPENCE, GARY WILTON RE			81		lame itreet Address (P.O. Box Number is Not Acceptable)	-
	COUNTY RD. 269 RT. 1, BOX 286 B QUINCY FL 32351		83		city 85 Zip Code	

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			<u> </u>
		Registered Agent signature	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D DELETE	1.1 TITLE	Change Addition
NAME	KENT, BEN	1.2 NAME	Lamieux, Ronaic
STREET ADDRESS	2166 W. CAROLINA STREET	1.3 STREET ADDRESS	Lamieux, Ronald West 8th St.
CITY-ST-ZIP	QUINCY, FL 32351	1.4 CITY-ST-ZIP	Greenshoro, Fl. 32330
TITLE	PD DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	SPENCE, GARY WILTON RE	2.2 NAME	
STREET ADORESS	COUNTY RD. 269, RT.1 BOX 286 B	2.3 STREET ADDRESS	'
CITY-ST-ZIP	QUINCY, FL 32351	2. 4 CITY-ST-ZIP	
TITLE	TD DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	BENTLY, LANE	3.2 NAME	
STREET ADDRESS	HWY 12 SO, PO BOX 781 NA	3.3 STREET ADDRESS	
CITY-ST-ZIP	BRISTOL FL 32321	3.4. CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	Change Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CfTY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	·
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
C/TY-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.