2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Feb 13, 2008 08:00 AN Secretary of State **DOCUMENT # 749724** 1. Entity Name THE BETHEL ASSEMBLY OF GOD CHURCH OF GREENSBORO, INC. Principal Place of Business Mailing Address 1882 PINEGROVE CHURCH RD 1882 PINEGROVE CHURCH RD QUINCY FL 32351 **QUINCY FL 32351** 3. Mailing Address 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/07) City & State City & State 4. FEI Number Applied For 59-2240761 Not Applicable Zip Country Zιρ Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PETTIS, CHARLES A REV. Street Address (P.O. Box Number is Not Acceptable) 1882 PÍNE GROVE CHURCH ROAD QUINCY FL 32351 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Reg stared Agent signature reduced when reinstating) CATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2008 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Delete TITLE Change ☐ Addition WHITE, OTHA NAME 1638 JUNIPER RD STREET ADDRESS STREET ADDRESS QUINCY FL 32351 CITY-ST-ZIP CITY-ST-ZIP PD TITLE Delate TITLE ☐ Change Addition PETTIS, CHARLES A NAME MAME 02/21/08-80057-008 61.25 CNTY RD, # 269, 1882 PINE GROVE CHURCH RD STREET ADDRESS STREET ADDRESS QUINCY FL 32351-9742 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition BENTLEY, HARRY L SEC/TR NAME NAME 12961 NW CR 12, PO BOX 781 STREET ADDRESS STREET ADDRESS BRISTOL FL 32321 CITY-ST-ZIP CITY-ST-7/P TITLE ☐ Delete TILLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZiP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET AUDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP THLE ☐ Delete TITLL Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

CITY-ST-ZIP 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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