

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # 756716

1. Entity Name

BETHEL COMMUNITY CHURCH, INC.



FILED

Mar 19, 2007 8:00 am
Secretary of State

03-19-2007 90064 040 ****61.25



1st MOORE CR2E037 (10/06)

Principal Place of Business		Mailing Address	
5632 GANTT ROAD SARASOTA FL 34233		5632 GANTT ROAD SARASOTA FL 34233	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent			
<p>CAMPA, LARRY 13797 N BRANCH RD 7545 Palmer Glen Cir SARASOTA FL 34240</p>			
7. Name and Address of New Registered Agent			
<p>Name Street Address (P.O. Box Number is Not Acceptable) City</p>			
<p>FL Zip Code</p>			

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: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25 Due By May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-SI-ZIP	D ATMORE, RUSS 2547 W SCARLET OAK CT SARASOTA FL 34232	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-SI-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-SI-ZIP	D HARSHAW, JIM 5132 TREESDALE CT SARASOTA FL 34238	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-SI-ZIP	BILL KOENS 1210 8th St. West PALMETTO, FL 34221 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-SI-ZIP	D CAMPBELL, LARRY L. 13797 N BRANCH RD 7545 Palmer Glen Cir SARASOTA FL 34240	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-SI-ZIP	CAMPBELL, LARRY L. 7545 PALMER GLEN CIR SARASOTA FL 34240 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-SI-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-SI-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-SI-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-SI-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-SI-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-SI-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby 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.

SIGNATURE: *Larry L. Camp*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #