## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#768028** 

FILED May 15, 2007 Secretary of State

Entity Name: GREATER BETHEL AFRICAN METHODIST EPISCOPAL CHURCH, INC.

**Current Principal Place of Business: New Principal Place of Business:** 701 S E 43RD ST GAINESVILLE, FL 32641 US **Current Mailing Address: New Mailing Address:** 701 S E 43RD ST GAINESVILLE, FL 32641 US FEI Number: 59-2342883 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) 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: Name and Address of New Registered Agent: CHAMPION, REV. DR. G.L SMITH, REV. KARL V 701 S E 43RD ST 701 S É 43RD ST GAINESVILLE, FL 32641 US GAINESVILLE, FL 32641 US 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: KARL V. SMITH 05/15/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete CHAMPION, REV. DR. G.L SR SMITH, REV. KARL V Name: Name: 4229 NW 43RD STREET M98 Address: 701 S E 43RD ST Address: City-St-Zip: GAINESVILLE, FL 32606 City-St-Zip: GAINESVILLE, FL 32641 Title: VC ( ) Delete Title: () Change () Addition Name: GEORGE, EDDIE Name: Address: 309 N.W. 4TH STREET Address: City-St-Zip: GAINESVILLE, FL 32601 City-St-Zip: Title: VD () Delete Title: () Change () Addition BROWN, ANDREW W Name: Name: 5224 NW 18TH ST. Address: Address: City-St-Zip: GAINESVILLE, FL 32605 City-St-Zip: Title: () Delete Title: () Change () Addition Name: SMITH, STAFFON Name: 205 SW 75TH ST. APT 12-C Address: Address: City-St-Zip: GAINESVILLE, FL 32607 City-St-Zip: Title: Title: () Delete () Change () Addition PRICE, ELVIN T Name: Name: 2701 SW W 13TH ST. #K-15 Address: Address: City-St-Zip: GAINESVILLE, FL 32608 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: KARL V. SMITH PD 05/15/2007