

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768878

FILED
May 14, 2005
Secretary of State

Entity Name: BETHEL AFRICAN METHODIST EPISCOPAL CHURCH, TALLAHASSEE, FLORIDA, INCORPORATED

Current Principal Place of Business:

501 WEST ORANGE AVENUE
TALLAHASSEE, FL 32310

New Principal Place of Business:

Current Mailing Address:

501 WEST ORANGE AVENUE
TALLAHASSEE, FL 32310

New Mailing Address:

FEI Number: 59-1706181 **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:

GREEN, JOHN F REV
130 COTILLION CIR
TALLAHASSEE, FL 32312 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GREEN, JOHN F
Address: 130 COTILLION CIR
City-St-Zip: TALLAHASSEE, FL 32312

Title: CD () Delete
Name: WEBSTER, JOSEPH
Address: 4891 HIGHGROVE ROAD
City-St-Zip: TALLAHASSEE, FL 32308

Title: TD () Delete
Name: PERRY, ALFRED
Address: 3105 RACKLEY DR
City-St-Zip: TALLAHASSEE, FL 32301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GREEN, JOHN F
Address: 130 COTILLION CIR
City-St-Zip: TALLAHASSEE, FL 32312

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOHN F. GREEN

PD

05/14/2005

Electronic Signature of Signing Officer or Director

Date