

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Aug 16, 2006
Secretary of State

DOCUMENT# C95000000002

Entity Name: BETHEL A.M.E.CHURCH INC.

Current Principal Place of Business:245 NW 8TH STREET
MIAMI, FL 33136**New Principal Place of Business:****Current Mailing Address:**245 NW 8TH STREET
MIAMI, FL 33136**New Mailing Address:**

FEI Number: 65-0061376

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:GAYLES, DARRIN
245 NW 8TH STREET
MIAMI, FL 33136 US**Name and Address of New Registered Agent:**

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: P () Delete
Name: BROOMFIELD, MILTON
Address: 245 NW 8TH STREET
City-St-Zip: MIAMI, FL 33136Title: VP () Delete
Name: DICKSON, GWENDOLYN
Address: 245 NW 8TH STREET
City-St-Zip: MIAMI, FL 33136Title: T () Delete
Name: JOHNSON, NANCY
Address: 245 NW 8 STREET
City-St-Zip: MIAMI, FL 33136Title: S () Delete
Name: KOONCE, GEORGE
Address: 245 NW 8 STREET
City-St-Zip: MIAMI, FL 33136Title: () Delete
Name:
Address:
City-St-Zip:Title: () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: S (X) Change () Addition
Name: JOHNSON, NANCY
Address: 245 NW 8 STREET
City-St-Zip: MIAMI, FL 33136Title: T (X) Change () Addition
Name: KOONCE, GEORGE
Address: 245 NW 8 STREET
City-St-Zip: MIAMI, FL 33136Title: S () Change (X) Addition
Name: MC KNIGHT, IRBY
Address: 245 NW 8 STREET
City-St-Zip: MIAMI, FL 33136Title: L () Change (X) Addition
Name: TROUTMAN, NAOMI
Address: 245 NW 8 STREET
City-St-Zip: MIAMI, FL 33136

I hereby certify that the information supplied with this filing does not qualify for the 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: GWENDOLYN DICKSON

VP

08/16/2006

Electronic Signature of Signing Officer or Director

Date