

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006547

FILED  
Sep 08, 2004  
Secretary of State

Entity Name: BETHLEHEM FULL GOSPEL MINISTRIES, INC.

**Current Principal Place of Business:**

4551 SE GERALDINE ST.  
STUART, FL 34997

**New Principal Place of Business:**

**Current Mailing Address:**

4551 SE GERALDINE ST.  
STUART, FL 34997

**New Mailing Address:**

FEI Number: 65-1090561

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

JOHNSON, JR., HOSEY L  
4551 SE GERALDINE ST.  
STUART, FL 34997 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: D ( ) Delete  
Name: JOHNSON, JR., HOSEY L  
Address: 2855 SW ANN ARBOR RD.  
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: D ( ) Delete  
Name: DELANCY, GAILYA  
Address: 5744 SE 47TH AVE.  
City-St-Zip: STUART, FL 34997

Title: D ( ) Delete  
Name: TAYLOR, SYLVIA  
Address: 5673 SE 47TH AVE.  
City-St-Zip: STUART, FL 34997

Title: DT ( ) Delete  
Name: CLARK, ERNESTINE  
Address: 4659 SE 44TH AVE  
City-St-Zip: STUART, FL 34997

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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: HOSEY L. JOHNSON, JR.

PAST

09/08/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date