

**2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 15, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # N01000005322**

1. Entity Name  
**BETHLEHEM CHURCH OF GOD IN CHRIST, INC.**



Principal Place of Business  
**3060 MCCALL BRIDGE ROAD  
QUINCY, FL 32351**

Mailing Address  
**P O BOX 472  
QUINCY, FL 32353**



01062008 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-3576600</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

**FLANAGAN, JOSEPH JR  
119 REED STREET  
QUINCY, FL 32351**

**DO NOT WRITE  
IN THIS SPACE**

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 *X Joseph Flanagan Jr*  
Signature, typed or printed name of registered agent and not applicable

*1/14/08*  
DATE

(NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25  
Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**U00000784988  
01/16/08-80077-011 61.25**

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ROBINSON, EMANUEL 614 FIFTH STREET QUINCY, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FLANAGAN, JOSEPH JR 119 REED ST QUINCY, FL 32351
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ROBINSON, LYDIA 2100 APALACHEE PKWY TALLAHASSEE, FL 32301
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FORD, ELLOUISE 336 REYNOLD ROAD QUINCY, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ROBINSON, A.B. 209 HOLT LANE QUINCY, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROBINSON, CLARENCE 368 REYNOLDS ROAD QUINCY, FL

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *X Joseph Flanagan Jr*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*1/14/08* *(850)524-0073*  
Date Daytime Phone