2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005968

FILED Apr 16, 2009 Secretary of State

Entity Name: BETHESDA WORD OF FAITH CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business: 3650 17TH STREET SARASOTA, FL 34235 **Current Mailing Address: New Mailing Address:** PO BOX 923 SARASOTA, FL 34230 FEI Number: 02-0591792 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GREENIDGE, PETER 4954 CEDAR OAK WAY SARASOTA, FL 34233 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete GREENIDGE, PETER GREENIFYE, PETER Name: Name: 4959 CEDAR OAK WAY Address: 4959 CEDAR OAK WAY Address: City-St-Zip: SARASOTA, FL 34230 City-St-Zip: SARASOTA, FL 34230 Title: () Delete Title: () Change () Addition COKLEY, HENRY Name: Name: Address: 2063 28TH STREET Address: City-St-Zip: SARASOTA, FL 34234 City-St-Zip: Title: () Delete Title: () Change () Addition JAMES, CALVIN Name: Name: Address: 1811 CON RAD AVE Address: City-St-Zip: SARASOTA, FL 34234 City-St-Zip: Title: D () Delete Title: () Change () Addition Name: JAMES, TWYLA Name: 1811 CONRAD AVE Address: Address: City-St-Zip: SARASOTA, FL 34234 City-St-Zip: Title: () Delete Title: (X) Change () Addition DEENER, PRISCILLA DEENER, PRISCILLA Name: Name: 2805 GOODRICH AV 2805 GOODRICH AVE Address: Address: City-St-Zip: SARASOTA, FL 34234 City-St-Zip: SARASOTA, FL 34234 Title: () Delete Title: (X) Change () Addition HARPER, CATHRYN A EDDIE. SHELLI Name: Name: Address: 2777 PALM LAKE DR Address: 3119 HEATHERWOOD LANE SARASOTA, FL 34234 SARASOTA, FL 34235 City-St-Zip: 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: PETER GREENIDGE C 04/16/2009