2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: Myory Care

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Apr 28, 2005 8:00 am Secretary of State DOCUMENT # N02000002133 04-28-2005 90164 003 ****61.25 THE BETHEL SPIRITUAL BAPTIST CHURCH, INC. Principal Place of Business Mailing Address 1250 NW 174TH ST 1250 NW 174TH ST 14003298 MIAMI, FL 33169 MIAMI, FL 33169 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03182005 Chg-NP CR2E037 (10/03) Applied For City & State 4. FEI Number 65-0707567 City & State Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BROWNE, WINIFRED Street Address (P.O. Box Number is Not Acceptable) 14030 BISCAYNE BOULEVARD #417 NORTH MIAMI, FL 33181 Zip Code City 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when relistating) DATE 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Oue by May 1, 2005 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. 1250 N.W 174th Street Change TITLE DILE ☐ Delete ☐ Acqilion CAMPBELL, MAJORIE NAME NAME STREET ADDRESS STREET ADDRESS 1250 NW 164TH STREET Miami Florida 33/69 MIAMI, FL 33169 CITY-ST-ZIP CITY-ST-ZP Carlitha I. Verbond Change Delete TITLE Addition TITLE MANNING, LINETTEH NAME NAME 7221 Embassy Blud. 3400 NW 194TH TERRACE STREET ADDRESS STREET ADDRESS Miramar, Florida 33023 CITY-ST-7P CDY-51-7P MIAMI, FL 33056 **Delete** TITLE K Change ☐ Accition nn = James Elmina 2984 N.W. 193 Terrace NAME CAMPBELL, RHONDA NAME 1250 NW 174TH ST STREET ADDRESS STREET ADDRESS Miami Florida 33056 CITY-51-22 MIAMI, FL 33169 OTY-ST-ZIP ☐ Change TITLE Delete TITLE Accition NAME YAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Chance Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZP no e Delete TITLE ☐ Change Acdition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P 12. I hereby certify that the information supplied with this filing does not qualify 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 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 rustee 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.

MAJORIE CAMPBELL 4/19/05

FILED