


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**

**Apr 14, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT #N02000002463 1. Entity Name ASSEMBLY OF GOD BETHEL CHURCH CORPORATION	
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Principal Place of Business 4610 86 ST W BRADENTON, FL 34210	Mailing Address 4610 86 ST W BRADENTON, FL 34210
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04072006 No Chg-NP CR2E037 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 03-0396595	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fees Required

6. Name and Address of Current Registered Agent  MACHADO, NELSON C JR 4610 86 ST W BRADENTON, FL 34210
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**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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE \_\_\_\_\_

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT MACHADO, NELSON C JR 1820 53 AVE W BRADENTON, FL 34206
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT ROCHA, WALBER 1820 53 AVE W BRADENTON, FL 34206
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT MACHADO, KELMA 4610 86ST W BRADENTON, FL 34210
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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04/29/06-80030-003 70.00^M

**DO NOT WRITE  
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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: *Nelson C. Machado Jr* 04.07.06 941 792 9763  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #