2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000009290

MC

(X) Delete

WASHINGTON, KEVIN

715 14TH STREET WEST

BRADENTON, FL 34205

Title:

Name:

Address: City-St-Zip:

FILED May 02, 2009 Secretary of State

Entity Na	me: NEW BETHEL INTERNATIONAL CHU	JRCH, INC.
Current Principal Place of Business:		New Principal Place of Business:
2902 9TH ST WEST BRADENTON, FL 34205		11457 WALDEN LOOP PARRISH, FL 34219
Current Mailing Address:		New Mailing Address:
2902 9TH ST WEST BRADENTON, FL 34205		11457 WALDEN LOOP PARRISH, FL 34219
	r: 30-0042896 FEI Number Applied For () nce with s. 607.193(2)(b), F.S., the corporation did r	FEI Number Not Applicable () Certificate of Status Desired (X) not receive the prior notice.
Name and	d Address of Current Registered Agent:	Name and Address of New Registered Agent:
11457 WA PARRISH, The above	, GREGORY ALDEN LOOP , FL 34219 US e named entity submits this statement for the se of Florida.	purpose of changing its registered office or registered agent, or both,
	RE: GREGORY BOOKER	
	Electronic Signature of Registered Ag	gent Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	PC () Delete BOOKER, GREGORY 11457 WALDEN LOOP PARRISH, FL 34219	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D () Delete EDWARDS, MAE 3622 LAKE BAYSHORE DR #302K BRADENTON, FL 34205	Title: D (X) Change () Addition Name: BOOKER, SANDRA Address: 11457 WALDEN LOOP City-St-Zip: PARRISH, FL 34219
Title: Name: Address: City-St-Zip:	TCD () Delete MCINTOSH, FREDERICK 1804 26 AVE E BRADENTON, FL 34208	Title: D (X) Change () Addition Name: JOHNSON, TONY Address: 5424 8TH STREET CT WEST City-St-Zip: BRADENTON, FL 34207
Title: Name: Address: City-St-Zip:	MC (X) Delete WAY, RODREGO 2365 NOWATNEY AVE NORTH PORT, FL 34286	Title: () Change () Addition Name: Address: 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: GREGORY BOOKER PC 05/02/2009

() Change () Addition