2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009531

FILED Jul 13, 2008 Secretary of State

Entity Name: BETHEL BAPTIST CHURCH OF NEW PORT RICHEY, INC.

Current Pr	incipal Place of Business:	New Princ	ipal Place of Business:
9847 STAT NEW POR	E RD. 54 「RICHEY, FL 34655		
Current Mailing Address:		New Mailing Address:	
9847 STAT NEW POR	E RD. 54 「RICHEY, FL 34655		
FEI Number: 02-0540786 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent:			
	: TRICHEY, FL 34655 US named entity submits this statement for the purpose o	of changing i	ts registered office or registered agent, or both,
SIGNATUR			
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	T () Delete LIVINGSTON, GREGORY T 2829 MINGO DRIVE LAND O LAKES, FL 34638	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	VC () Delete BAUMANN, TERRY 7214 BROMLEY DRIVE NEW PORT RICHEY, FL 34653	Title: Name: Address: City-St-Zip:	VC (X) Change () Addition BAUMANN, TERRY 2550 STAG RUN BLVD. #314 CLEARWATER, FL 33765
Title: Name: Address: City-St-Zip:	PD () Delete KRAVITZ, DAVID 9847 STATE ROAD 54 NEW PORT RICHEY, FL 34655	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	S () Delete LARRIMORE, BEN 3225 TOWN AVENUE NEW PORT RICHEY, FL 34655	Title: Name: Address: City-St-Zip:	()Change ()Addition

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: GREGORY T LIVINGSTON T 07/13/2008