

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02424

FILED
Jan 29, 2009
Secretary of State

Entity Name: BETHEL CHRISTIAN METHODIST EPISCOPAL CHURCH INC.

Current Principal Place of Business:

%NANCY J. KNIGHT
1719 22ND STREET
SARASOTA, FL 34234

New Principal Place of Business:

1719 22ND STREET
SARASOTA, FL 34234

Current Mailing Address:

PO BOX 48295
SARASOTA, FL 34278 US

New Mailing Address:

FEI Number: 65-0160450 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KNIGHT, NANCY J
1777 18TH ST
SARASOTA, FL 34234 US

Name and Address of New Registered Agent:

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:

Title: PTR () Delete
Name: THOMAS, PRECIOUS
Address: 2724 24TH STREET
City-St-Zip: SARASOTA, FL 34234

Title: TD () Delete
Name: JORDAN, JAMES
Address: 1348 14TH STREET
City-St-Zip: SARASOTA, FL 34234

Title: SD () Delete
Name: KNIGHT, NANCY J.
Address: 1777 18TH ST
City-St-Zip: SARASOTA, FL 34234

Title: D () Delete
Name: HAMILTON, ALBERTA
Address: 3003 GILLESPIE AVE
City-St-Zip: SARASOTA, FL 34234

Title: CT () Delete
Name: SERMON, GWEN
Address: 2517 BROWNING ST
City-St-Zip: SARASOTA, FL 34237C

Title: VD () Delete
Name: GAINES, DIANE
Address: 6253 MURIWOOD CT
City-St-Zip: SARASOTA, FL 34243

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
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Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: JOHN W. WALKER, JR.

PTR

01/29/2009

Electronic Signature of Signing Officer or Director

_____ Date