

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 04, 2005 8:00 am
Secretary of State

08-04-2005 90002 024 ****61.25

DOCUMENT # N04000005438

1. Entity Name
BETSER 7TH DAY CHURCH, INC.



Principal Place of Business
**864 ADOUR DRIVE
KISSIMMEE, FL 34759**

Mailing Address
**864 ADOUR DRIVE
KISSIMMEE, FL 34759**

50059827



2. Principal Place of Business

3. Mailing Address

07192005 Chg-NP CR2E037 (10/03)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

02-0724456

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CADET, ROBERT
864 ADOUR DRIVE
KISSIMMEE, FL 34759**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 reinstating)

DATE

**Filing Fee is \$61.25
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME **P**
STREET ADDRESS **LOUIS-CHARLES, MOISE**
CITY-ST-ZIP **1725 SE ST. ANDREWS DRIVE
PALM CITY, FL 34990**

TITLE ☐ Delete
NAME **VP**
STREET ADDRESS **CADET, ROBERT**
CITY-ST-ZIP **864 ADOUR DRIVE
KISSIMMEE, FL 34759**

TITLE ☐ Delete
NAME **T**
STREET ADDRESS **LEBRUN, JOSEPH R**
CITY-ST-ZIP **400 TAMARIND PARK LANE
KISSIMMEE, FL 34759**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-27-05 **407-414-3580**

Date

Daytime Phone

ATTACHMENT

50059827

LAW OFFICE

JORDAN FIELDS, P. A.

A PROFESSIONAL ASSOCIATION

416 SE CORTEZ AVENUE

STUART, FLORIDA 34994

(772) 286-0890

FAX (772) 288-1728

jfpalaw@bellsouth.net

JORDAN FIELDS, Esquire

**YVONNE M. KOEHLER, CLA
CHRISTINE L. WATTS CLA**

August 1, 2005

Florida Department of State
Division of Corporations
PO Box 6198
Tallahassee, FL 32314-6198

RE: BETSER 7TH DAY CHURCH, INC.
Doc.# N04000005438

Dear Clerk,

Please find the following for filing:

- 1) A check in the amount of \$61.25 for filing fees for a Non-Profit Corporation.
- 2) A complete and signed Annual Report form.

Please file in the state's records.

If you have any questions please contact me at the above address or at [e-mail-jfpalaw@bellsouth.net](mailto:jfpalaw@bellsouth.net).

Thank you for your assistance in this request.

Yours truly,



T. Pensenti
attachments