

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 02, 2005 8:00 am
Secretary of State

03-02-2005 90085 024 ****70.00

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1. Entity Name

BETHESDA CHURCH & WORSHIP CENTER, INC.



Principal Place of Business

10855 HIGHWAY 4
MILTON FL 32570

Mailing Address

4651 WEST HIGHWAY 4
CENTURY FL 32535

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

201803953

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

1st MOORE

CR2E037 (10/04)



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MCCULLOUGH, CHARLES A
4651 WEST HIGHWAY 4
CENTURY FL 32535**

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

**FILE NOW: FEE IS \$61.25
Due By May 1, 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

TITLE PD ☐ Delete
NAME MCCULLOUGH, CHARLES A
STREET ADDRESS 4651 WEST HIGHWAY 4
CITY-ST-ZIP CENTURY FL 32535

TITLE VPD ☐ Delete
NAME CARROLL, ROBERT N
STREET ADDRESS 219 PATTON STREET
CITY-ST-ZIP CRESTVIEW FL 32536

TITLE VPD ☐ Delete
NAME ADAMS, MICHAEL D
STREET ADDRESS 40106 RANGE ROAD
CITY-ST-ZIP JAY FL 32565

TITLE VPD ☐ Delete
NAME OWENS, WILLIAM C
STREET ADDRESS 6419 HIGHWAY 4 WEST
CITY-ST-ZIP BAKER FL 32531

TITLE STD ☐ Delete
NAME MCCULLOUGH, BARBARA A
STREET ADDRESS 4651 WEST HIGHWAY 4
CITY-ST-ZIP CENTURY FL 32535

TITLE VPD ☐ Delete
NAME SEXTON, JOE V
STREET ADDRESS 1202 BARNEY ROAD
CITY-ST-ZIP WING AL 36483

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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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: Charles A. McCullough, Charles A. McCullough **2/25/05** **850-327-6064**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #