

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002525

FILED  
Apr 30, 2006  
Secretary of State

**Entity Name:** BETHLEHEM HOUSE OF PRAISE CHURCH, INC.

**Current Principal Place of Business:**

2809 ARAGON TERRACE  
SANFORD, FL 32746

**New Principal Place of Business:**

1402 W 16TH STREET  
SANFORD, FL 32771

**Current Mailing Address:**

2809 ARAGON TERRACE  
SANFORD, FL 32746

**New Mailing Address:**

P O BOX 391277  
DELTONA, FL 32739

**FEI Number:** 61-1484912

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

EDWARDS, REV. SAMMIE J SR.  
2809 ARAGON TERRACE  
LAKE MARY, FL 32746 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P ( ) Change (X) Addition  
Name: EDWARDS, SAMMIE J SR  
Address: 2809 ARAGON TERRACE  
City-St-Zip: LAKE MARY, FL 32746

Title: V ( ) Change (X) Addition  
Name: SHOOT, DAVID L  
Address: 3176 HOOVER DR  
City-St-Zip: DELTONA, FL 32738

Title: S ( ) Change (X) Addition  
Name: COFIELD, ARGIE  
Address: 2809 ARAGON TERRACE  
City-St-Zip: LAKE MARY, FL 32746

Title: T ( ) Change (X) Addition  
Name: RICHARDSON, KEESHA  
Address: 2952 ALLEGRO CT  
City-St-Zip: DELTONA, FL 32738

Title: T ( ) Change (X) Addition  
Name: SHOOT, CLARA L  
Address: 3176 HOOVER DR  
City-St-Zip: DELTONA, FL 32738

I hereby certify that the information supplied with this filing does not qualify for the 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: CLARA L SHOOT

T

04/30/2006

Electronic Signature of Signing Officer or Director

Date