

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# N05000006825

Entity Name: BETHESDA TABERNACLE CHRISTIAN COMMUNITY CHURCH OF PALM BEACH COUNTY, INC.

Current Principal Place of Business:

2923 SOUTH FEDERAL HIGHWAY
BOYNTON BEACH, FL 33435

New Principal Place of Business:

Current Mailing Address:

2923 SOUTH FEDERAL HIGHWAY
BOYNTON BEACH, FL 33435

New Mailing Address:

FEI Number: 47-0955198

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MERKLE, WILLIAM R
1901 SOUTH CONGRESS AVE. SUITE 120
BOYNTON BEACH, FL 33426 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: DP () Delete
Name: DOLCINE, DANIEL
Address: 3079 DORSON WAY
City-St-Zip: DELRAY BEACH, FL 33445

Title: DV () Delete
Name: LOUIS, MICLER
Address: 124 SW 12TH AVENUE
City-St-Zip: BOYNTON BEACH, FL 33435

Title: AD () Delete
Name: DERISCA, LEVOYANT
Address: 713 NW 8TH COURT
City-St-Zip: BOYNTON BEACH, FL 33435

Title: DT () Delete
Name: POMAPHIL, ROSETTE
Address: 2923 S FEDERAL HIGHWAY
City-St-Zip: BOYNTON BEACH, FL 33435

Title: SD () Delete
Name: PIERRE, RODY
Address: 2923 S FEDERAL HIGHWAY
City-St-Zip: BOYNTON BEACH, FL 33435

Title: D () Delete
Name: NORELIEN, IZALEM
Address: 2923 S FEDERAL HIGHWAY
City-St-Zip: BOYNTON BEACH, FL 33435

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
Name:
Address:
City-St-Zip:

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: LEVOYANT DERISCA

AD

04/30/2008

Electronic Signature of Signing Officer or Director

Date