2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006825

Mar 21, 2012 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

2923 SOUTH FEDERAL HIGHWAY BOYNTON BEACH, FL 33435

Current Mailing Address: New Mailing Address:

2923 SOUTH FEDERAL HIGHWAY BOYNTON BEACH, FL 33435

FEI Number: 47-0955198 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SAINVILUS, POINT DU JOUR DP
LEVOYANT, DERISCA ADM.
2923 S FEDERAL HIGHWAY
BOYNTON BEACH, FL 33435 US
LEVOYANT, DERISCA ADM.
2923 S FEDERAL HIGHWAY
BOYNTON BEACH, FL 33435 US

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: LEVOYANT DERISCA 03/21/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: ADM.

Name: LEVOYANT, DERISCA ADM.
Address: 2923 S FEDERAL HIGHWAY
City-St-Zip: BOYNTON BEACH, FL 33435

Title: S.P

Name: SAINVILUS, POINT DU JOUR S.P

Address: 2923 S FED. HWY

City-St-Zip: BOYNTON BEACH, FL 33435

Title: A.P

Name: DANIEL, DOLCINE A.P Address: 2923 SOUTH FED. HWY. City-St-Zip: BOYNTON BEACH, FL 33435

Title: DT

Name: POMAPHIL, ROSETTE DIR. TR Address: 2923 S FEDERAL HIGHWAY City-St-Zip: BOYNTON BEACH, FL 33435

City-St-Zip. BOTHTON BEACH, 1E 3343

Title: 9

Name: PIERRE, RODY SECRETA
Address: 2923 S FEDERAL HIGHWAY
City-St-Zip: BOYNTON BEACH, FL 33435

Title: MEME

Name: MICLER, LOUIS MEMBER
Address: 2923 SOUTH FED. HWY.
City-St-Zip: BOYNTON BEACH, FL 33435

I hereby 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 all other like empowered.

SIGNATURE: LEVOYANT DERISCA ADM 03/21/2012