

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007079

FILED  
Apr 29, 2009  
Secretary of State

**Entity Name:** BETHEL CHRISTIAN CENTER CHURCH, INC.

**Current Principal Place of Business:**

14516 CORKWOOD DR  
TAMPA, FL 33626

**New Principal Place of Business:**

**Current Mailing Address:**

14516 CORKWOOD DR  
TAMPA, FL 33626

**New Mailing Address:**

**FEI Number:** 30-0305134

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MILLER, ROYAL  
14516 CORKWOOD DR  
TAMPA, FL 33626 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: PRES ( ) Delete  
Name: MILLER, ROYAL  
Address: 14516 CORKWOOD DR  
City-St-Zip: TAMPA, FL 33626

Title: VICE ( ) Delete  
Name: MILLER, YVETTE  
Address: 14516 CORKWOOD DR  
City-St-Zip: TAMPA, FL 33626

Title: SEC ( ) Delete  
Name: ZUCKERMAN, PUAL  
Address: 2441 PERSIA DR.  
City-St-Zip: CLEARWATER, FL 33758

Title: D ( ) Delete  
Name: DIGGINS, BEN  
Address: 67-74 HAVEN PLACE  
City-St-Zip: TARPON, FL 34689

Title: D ( ) Delete  
Name: MILLER, EVA  
Address: 2310 DENMARK STREET  
City-St-Zip: CLEARWATER, FL 33758

**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:

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: ROYAL W. MILLER

PRES

04/29/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date