

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010757

FILED  
May 19, 2008  
Secretary of State

**Entity Name:** BETHEL MISSION INTERNATIONAL FELLOWSHIP, INC.

**Current Principal Place of Business:**

304 NW 12TH AVE  
BOCA RATON, FL 33486

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 272219  
BOCA RATON, FL 33427

**New Mailing Address:**

**FEI Number:** 20-3650772      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

WESTMAN SENAT  
304 NW 12TH AVE  
BOCA RATON, FL 33486      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SENAT, WESTMAN PR  
Address: 304 NW 12TH AVE  
City-St-Zip: BOCA RATON, FL 33486

Title: VP ( ) Delete  
Name: PAIVA, LUIZ  
Address: 8271 GENOVA WAY  
City-St-Zip: LAKE WORTH, FL 33467

Title: T ( ) Delete  
Name: PAIVA, MARCIA  
Address: 8271 GENOVA WAY  
City-St-Zip: LAKE WORTH, FL 33467

Title: T ( ) Delete  
Name: PETERS, BRYAN  
Address: 304 NW 12TH AVE  
City-St-Zip: BOCA RATON, FL 33486

Title: S ( ) Delete  
Name: ROUSSEAU, ELY  
Address: 304 NW 12TH AVE  
City-St-Zip: BOCA RATON, FL 33486

Title: D ( ) Delete  
Name: SENAT, MYRTHA  
Address: 304 NW 12TH AVE  
City-St-Zip: BOCA RATON, FL 33486

**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: WESTMAN SENAT

P

05/19/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date