

1 of 2

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07 SEP -6 AM 10:35

DOCUMENT # N06000010233			
1. Entity Name BETHEL AFRICAN METHODIST EPISCOPAL CHURCH OF LAKE CITY, INC.			
Principal Place of Business 838 SOUTH WEST CR 242A LAKE CITY, FL 32025		Mailing Address P.O. BOX 1984 LAKE CITY, FL 32056	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number		Applied For ☒ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of Now Registered Agent	
YOUNG, MCKINLEY 101 EAST UNION STREET SUITE 300 JACKSONVILLE, FL 32202		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing)			
Filing Fee is \$61.25 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HOUSTON, JAMES L 3113 MAE RD TALLAHASSEE, FL 32312 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	600109131706 09/06/07--01028--001 **\$61.25 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HONER, SAMUEL 102 SW HONOR LANE LAKE CITY, FL 32025 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HARRELL, TERRY 424 SW TUSTENUGGEE AVE LAKE CITY, FL 32025 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BRADY, PATRICIA 343 SW PRESLEY TERRANCE LAKE CITY, FL 32025 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, CATHRYN 9765 SW JONES TERRANCE LAKE CITY, FL 32025 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MURPHY, DENNIS 436 SW THOMPINS LOOP LAKE CITY, FL 32025 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>James L. Houston</u>		JAMES L. HOUSTON 8/15/2007 8503854286	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

Bethel African Methodist Episcopal Church of Lake City, Inc – N06000010233

Additional Officers/Directors

D	Simon Honer	408 SW Presley Terrance Lake City, FL 32025
D	Raymond Brady	343 SW Presley Terrance Lake City, FL 32025
D	Fred Jones	1022 SW CR 242A Lake City, FL 33025
D	Johnnie L. Dix	1294 Packard Street Lake City, FL 32025
D	Sammie Harrell	215 SE Camelot Loop Lake City, FL 32025