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2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

GNATURE AND TYPED OR PRINTED

SIGNATURE

FILED DOCUMENT # N06000010233 09 AUG 27 PM 2: 00 BETHEL AFRICAN METHODIST EPISCOPAL CHURCH OF LAKE CITY, INC. SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 838 SOUTH WEST CR 242A P.O. BOX 1984 LAKE CITY, FL 32025 LAKE CITY, FL 32056 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07162009 Chq-NP CR2E037 (11/08) 4. FEI Number NOT APPLICABLE Applied For City & State City & State Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name YOUNG, MCKINLEY 101 EAST UNION STREET Street Address (P.O. Box Number is Not Acceptable) SUITE 300 JACKSONVILLE, FL 32202 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 Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Filing Fee is \$61.25 Make check payable to \$5.00 May Be Trust Fund Contribution Due by September 11, 2009 Added to Fees Fiorida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Delete TITI F 20015998378 08/27/03--01003--010 ** Addition HOUSTON, JAMES L NAME NAME STREET ADDRESS 3113 MAE RD STREET ADDRESS CITY-ST-ZIP TALLAHASSEE, FL 32312 CtTY - ST - ZtP TITLE VD Delete TITLE ☐ Change Addition NAME HONER, SAMUEL NAME STREET ADDRESS 102 SW HONOR LANE STREET ADDRESS CITY - ST-ZIP LAKE CITY, FL 32025 CITY - ST- 7IP TD TITLE ☐ Defete TITLE ☐ Change Addition NAME HARRELL, TERRY NAME 424 SW TUSTENUGGEE AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAKE CITY, FL 32025 CITY - ST-ZIP TITLE ☐ Delete TITLE Change Addition BRADY, PATRICIA MARAF NAME STREET ADDRESS 343 SW PRESLEY TERRANCE STREET ADDRESS CITY-ST-ZIP LAKE CITY, FL 32025 CITY - ST-ZIP TITLE ☐ Delete THUE ☐ Change ☐ Addition BROWN, CATHRYN NAME NAME STREET ADDRESS 9765 SW JONES TERRANCE STREET ADDRESS CITY-ST-ZIP LAKE CITY, FL 32025 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition MURPHY, DENNIS NAME NAME STREET ADDRESS 436 SW THOMPKINS LOOP STREET ADDRESS CITY-ST-ZIP LAKE CITY, FL 32025 CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 of 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 allighter like impowered.

NG OFFICER OR DIRECTOR

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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
D	Chris Mirra	186 SW Russwood Terrance Lake City, FL 32024