FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 AM 9:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # N10541 (3)

1. Corporation Name

BETHEL BAPTIST CHURCH OF FORT-LAUDERDALE, FLORIDA, INC.

Principal Place of Business	Mailing Address
2390 N. W. 34TH TERR. FORT LAUDERDALE FL 33311	2390 N. W. 34TH TERR. FORT LAUDERDALE FL 33311

3. Date Incorporated or Qualified: 08/02/1985
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-2559875 — ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip — 25 Country	29 Zip — 30 Country

5. Certificate of Status Desired ☑ — **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
DALRYMPLE, DENISE 2390 N. W. 34TH TERR. FORT LAUDERDALE FL 33311	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City — FL — 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ______________________ DATE ________

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	T	1.1 TITLE ☐ Change ☐ Addition
NAME	DALRYMPLE, INA	1.2 NAME
STREET ADDRESS	2390 N. W. 34TH TERR.	1.3 STREET ADDRESS
CITY-ST-ZIP	FORT LAUDERDALE FL	1.4 CITY-ST-ZIP
TITLE	V	2.1 TITLE ☐ Change ☐ Addition
NAME	DALRYMPLE, LAWRENCE SR.	2.2 NAME
STREET ADDRESS	2390 N. W. 34TH TERR.	2.3 STREET ADDRESS
CITY-ST-ZIP	FORT LAUDERDALE FL	2.4 CITY-ST-ZIP
TITLE	S	3.1 TITLE ☐ Change ☐ Addition
NAME	VASSELL, BARRINGTON	3.2 NAME
STREET ADDRESS	18899 N. W. 11TH CT.	3.3 STREET ADDRESS
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP
TITLE	D	4.1 TITLE ☐ Change ☐ Addition
NAME	DALRYMPLE JR., LAWRENCE	4.2 NAME
STREET ADDRESS	2390 N. W. 34TH TERR.	4.3 STREET ADDRESS
CITY-ST-ZIP	FORT LAUDERDALE FL	4.4 CITY-ST-ZIP
TITLE	D	5.1 TITLE ☐ Change ☐ Addition
NAME	RUSSELL, NOEL	5.2 NAME
STREET ADDRESS	591 NW 45TH TERR	5.3 STREET ADDRESS
CITY-ST-ZIP	PLANTATION FL	5.4 CITY-ST-ZIP
TITLE	PD	6.1 TITLE ☐ Change ☐ Addition
NAME	DALRYMPLE, DENISE	6.2 NAME
STREET ADDRESS	2390 N.W. 34TH TERR.	6.3 STREET ADDRESS
CITY-ST-ZIP	FT.LAUDERDALE FL	6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Ina Dalrymple / INA DALRYMPLE — 4-27-95 — 305-731-0650 / 305 472-3321

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0046070