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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N10541

1. Corporation Name
BETHEL BAPTIST CHURCH OF FORT-LAUDERDALE, FLORIDA, INC.

Principal Place of Business 6060 KIMBERLY BLVD NO LAUDERDALE FL 33068 US	Mailing Address 6060 KIMBERLY BLVD NO LAUDERDALE FL 33068 US
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29	3. Date Incorporated or Qualified 08/02/1985	4. FEI Number 59-2559875 Applied For <input checked="" type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

9: Name and Address of Current Registered Agent

DALRYMPLE, LAWRENCE A SR
 2390 N. W. 34TH TERR.
 FORT LAUDERDALE FL 33311

10. Name and Address of New Registered Agent

81 Name Dalrymple Lawrence A Sr	82 Street Address (P.O. Box Number is Not Acceptable) 5450 NW 49 Street	83 City Coconut Creek FL	84 City FL	85 Zip Code 33073
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE **Lawrence Dalrymple Sr. Pres. Lawrence Dalrymple Sr.** DATE **4/26/99**

12. OFFICERS AND DIRECTORS

TITLE	<input checked="" type="checkbox"/> DELETE
NAME	DALRYMPLE, INA
STREET ADDRESS	2390 N. W. 34TH TERR.
CITY-ST-ZIP	FORT LAUDERDALE FL
TITLE	<input checked="" type="checkbox"/> DELETE
NAME	DALRYMPLE, LAWRENCE SR.
STREET ADDRESS	2390 N. W. 34TH TERR.
CITY-ST-ZIP	FORT LAUDERDALE FL
TITLE	<input type="checkbox"/> DELETE
NAME	VASSELL, BARRINGTON
STREET ADDRESS	18899 N. W. 11TH CT.
CITY-ST-ZIP	MIAMI FL
TITLE	<input checked="" type="checkbox"/> DELETE
NAME	DALRYMPLE JR., LAWRENCE
STREET ADDRESS	2390 N. W. 34TH TERR.
CITY-ST-ZIP	FORT LAUDERDALE FL
TITLE	<input type="checkbox"/> DELETE
NAME	RUSSELL, NOEL
STREET ADDRESS	591 NW 45TH TERR
CITY-ST-ZIP	PLANTATION FL
TITLE	<input type="checkbox"/> DELETE
NAME	DVP
STREET ADDRESS	DUMMIYNAY, DENISE
CITY-ST-ZIP	2390 N.W. 34TH TERR. FT. LAUDERDALE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Dalrymple, INA
1.3 STREET ADDRESS	5450 NW 49 Street
1.4 CITY-ST-ZIP	FORT LAUDERDALE FL 33073
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Dalrymple, Lawrence Sr.
2.3 STREET ADDRESS	5450 NW 49 Street
2.4 CITY-ST-ZIP	Coconut Cr, FL 33073
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	D Dalrymple, Lawrence Jr
4.3 STREET ADDRESS	5450 NW 49 Street
4.4 CITY-ST-ZIP	Coconut Cr, FL 33073
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	DVP.
6.3 STREET ADDRESS	Denise Dummiynay
6.4 CITY-ST-ZIP	5450 N.W. 49 Street Coconut Creek FL 33073

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

SIGNATURE: **Lawrence Dalrymple Sr. Pres.** SIGNATURE REQUIRED **4-26-99** 954-979-3321

CR2E037 (1/98)