

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 29, 2004  
Secretary of State**

DOCUMENT# N10541

**Entity Name:** BETHEL WORSHIP CENTER OF FORT LAUDERDALE, FLORIDA, INC.

**Current Principal Place of Business:**

6060 KIMBERLY BLVD  
NO LAUDERDALE, FL 33068 US

**New Principal Place of Business:**

**Current Mailing Address:**

6060 KIMBERLY BLVD  
NO LAUDERDALE, FL 33068 US

**New Mailing Address:**

**FEI Number:** 59-2559875      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

DALRYMPLE, LAWRENCE A SR  
12046 NW 49TH DRIVE  
CORAL SPRINGS, FL 33076

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

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: T                    ( ) Delete  
Name: RUSSELL, NOEL  
Address: 591 NW 45TH TERRACE  
City-St-Zip: PLANTATION, FL 33073
- Title: P                    ( ) Delete  
Name: DALRYMPLE, LAWRENCE, SR.  
Address: 12046 NW 49TH PLACE  
City-St-Zip: CORAL SPRINGS, FL 33076
- Title: S                    ( ) Delete  
Name: VASELL, BARRINGTON,  
Address: 18899 N. W. 11TH CT.  
City-St-Zip: MIAMI, FL
- Title: D                    ( ) Delete  
Name: DALRYMPLE JR., LAWRE, NCE  
Address: 12046 NW 49TH DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33076
- Title: D                    ( ) Delete  
Name: DALRYMPTE, DENISE  
Address: 12046 NW 49TH DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33076
- Title: D                    ( ) Delete  
Name: EULITH, AUSTIN  
Address: 5450 NW 49TH STREET  
City-St-Zip: COCONUT CREEK, FL 33073

**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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LAWRENCE DALRYMPLE, SR.

P

04/29/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date