

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 10, 2008
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 US**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 (X) Delete
Name: RUSSELL, NOEL
Address: 591 NW 45TH TERRACE
City-St-Zip: PLANTATION, FL 33073

Title: P, D () Delete
Name: DALRYMPLE, SR., LAWRENCE A
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, DENISE
Address: 12046 NW 49TH DRIVE
City-St-Zip: CORAL SPRINGS, FL 33076

Title: D (X) Delete
Name: EULITH, AUSTIN
Address: 6060 KIMBERLY BLVD
City-St-Zip: NORTH LAUDERDALE, FL 33068

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: T, D (X) Change () Addition
Name: DALRYMPLE, DENISE
Address: 12046 NW 49TH DRIVE
City-St-Zip: CORAL SPRINGS, FL 33076

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: DENISE DALRYMPLE

T, D

09/10/2008

Electronic Signature of Signing Officer or Director

Date