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Apr 24, 2003 8:00 am
Secretary of State

04-24-2003 90239 046 ****61.25

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

20034105

DOCUMENT # N10541

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

Principal Place of Business	Mailing Address
6060 KIMBERLY BLVD NO LAUDERDALE, FL 33068 US	6060 KIMBERLY BLVD NO LAUDERDALE, FL 33068 US

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number **59-2559875** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
DALRYMPLE, LAWRENCE A SR 5450 NW 49 ST COCONUT CREEK, FL 33093	Name: Lawrence A. Dalrymple, Sr. Street Address (P.O. Box Number is Not Acceptable): 12046 NW 49th Drive City: Coral Springs FL Zip Code: 33076

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: X Lawrence A Dalrymple Sr. 4-21-03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TVP DALRYMPLE, INA 5450 NW 49TH STREET COCONUT CREEK, FL 33073	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer Noel Russell 591 NW 45th Terrace Plantation, Fl	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P DALRYMPLE, LAWRENCE SR. 5450 NW 49 ST COCONUT CREEK, FL 33073	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Lawrence A. Dalrymple, Sr. 12046 NW 49th Drive Coral Springs, FL 33076	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S VASSELL, BARRINGTON 18899 N. W. 11TH CT. MIAMI, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DALRYMPLE JR., LAWRENCE 5450 NW 49 ST COCONUT CREEK, FL 33073	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Lawrence Dalrymple, JR 12046 NW 49th Drive Coral Springs, FL 33076	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RUSSELL, NOEL 591 NW 45TH TERR PLANTATION, FL	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Denise Dalrymple 12046 NW 49th Drive Coral Springs, FL 33076	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D EULITH, AUSTIN 5450 NW 49TH STREET COCONUT CREEK, FL 33073	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/02)

12. 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 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X Lawrence A Dalrymple Sr. 4-21-03 954-972-3321
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #