

N/3000010602

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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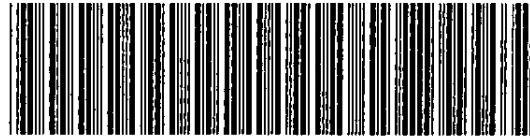
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K 11/25/13

**COVER LETTER**

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: Glorious BETHLEHEM Temple INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

\$70.00  
Filing Fee

\$78.75  
Filing Fee &  
Certificate of  
Status

\$78.75  
Filing Fee  
& Certified Copy

\$87.50  
Filing Fee,  
Certified Copy  
& Certificate

**ADDITIONAL COPY REQUIRED**

FROM: DONALD RICHARDSON SR.  
Name (Printed or typed)

2210 WISTER ST.  
Address

JACKSONVILLE, FL 32207  
City, State & Zip

904-783-1326  
Daytime Telephone number

DONALD.RICHARDSON@BELLSouth.NET  
E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 617, F.S., (Not for Profit)

**ARTICLE I NAME**

The name of the corporation shall be: GLORIOUS BETHLEHEM TEMPLE INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:

Mailing address, if different is:

2210 WISTER ST                      PO BOX 47379  
JACKSONVILLE, FL. 32207      JACKSONVILLE, FL. 32247

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: OUR PURPOSE IS TO REACH OUT TO EACH AND EVERY INDIVIDUAL WE POSSIBLY CAN WITH THE GOOD NEWS OF OUR LORD AND SAVIOR JESUS CHRIST. TO PROVIDE HELP FOR THE LOST AND NEEDY. FOR RELIGIOUS, EDUCATIONAL AND CHARITABLE PURPOSES.

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: \_\_\_\_\_

ARE APPOINTED BY OUR DIOCESE BISHOP OR A BOARD OF BISHOP IN OUR ORGANIZATION, PENTECOSTAL ASSEMBLIES OF THE WORLD.

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: DONALD RICHARDSON SR. / ASTOR Name and Title: \_\_\_\_\_

Address: 8210 GREEN PARROT RD #101 Address: \_\_\_\_\_  
JACKSONVILLE, FL. 32256

Name and Title: DAVID EDWARDS, DEACON Name and Title: \_\_\_\_\_

Address: 6650 RHONE DR. Address: \_\_\_\_\_  
JACKSONVILLE, FL 32208,

Name and Title: BILLY G. NEWTON, Bishop Name and Title: \_\_\_\_\_

Address: 1733 MERCY DRIVE Address: \_\_\_\_\_  
ORLANDO, FL. 32808

SECRETARY OF STATE  
TALLAHASSEE FLORIDA  
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Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: DONALD RICHARDSON SR, PASTOR  
Address: 8210 GREEN PARROT RD. #101  
JACKSONVILLE, FL. 32256

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DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: DONALD RICHARDSON SR, PASTOR  
Address: 8210 GREEN PARROT RD. #101  
JACKSONVILLE, FL. 32256

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

Donald W. Richardson Sr.  
Required Signature of Registered Agent

11/17/13  
Date

*I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

Donald W. Richardson Sr.  
Required Signature of Incorporator

11/17/13  
Date