

N/5000003381

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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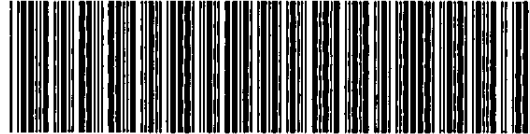
(Business Entity Name)

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*π 04/06/15*

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

R

SUBJECT: New Bethel AME Church, Interlachen 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: Rev. Larry Gilyard Sr.  
Name (Printed or typed)  
103 George Street  
Address  
Interlachen, Fl. 32148  
City, State & Zip  
386-937-2452  
Daytime Telephone number

E-mail address: (to be used for future annual report notification)

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

**ARTICLE I NAME**

New Bethel AME Church, Interlachen Inc.

The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
103 George Street. Interlachen FL. 32148

Mailing address, if different is:  
P. O. Box 783, Interlachen FL. 32148

**ARTICLE III PURPOSE**

The Mission of New Bethel AME Church is to minister to the  
The purpose for which the corporation is organized is: environmental needs of all people by spreading Christ's liberating Gospel through word and deed.

To seek the lost and serve the needy by preaching the Gospel, feeding the hungry, clothing the naked  
Housing the homeless, cheering the fallen, providing jobs, administering to the needs of those in  
jails, hospitals, asylums, mental institutions, senior citizen homes, caring for the sick and shut in.  
The mentally and socially disturbed, and encouraging thirst and economic advancement.

**ARTICLE IV MANNER OF ELECTION**

The manner in which the directors are elected and appointed:  
shall be elected at duly called Church Conferences, and Quarterly Conferences.

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

Name and Title: Rev. Larry Gilyard, Sr. Pastor  
Address: 103 George Street  
Interlachen, Florida 32148

Name and Title: Leo S. Granger Sr. *Steward-Protem*  
Address: P.O. Box 1887  
Interlachen, FL 32148

Name and Title: Tommy Jenkins, Director  
Address: P.O. Box 644  
Interlachen, Florida 32148

Name and Title: Liz Sharp *Trustee*  
Address: 1130 State Road 20  
Interlachen, Florida 32148

Name and Title: Georgette Mills *Steward*  
Address: 431 Wilson Drive  
Interlachen, FL 32148

Name and Title:  
Address:

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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: Leo S. Granger Sr.

Address:

Interlachen FI 32148

*- 119 Miller Square*

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Rev. Larry Gilyard, Sr.

Address:

103 George Street

Interlachen, Florida 32148

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*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*

*Leo S. Granger Sr.*  
Required Signature of Registered Agent

*3/21/15*  
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.*

*Rev. Larry B. Gilyard Sr.*  
Required Signature of Incorporator

*3-21-15*  
Date