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

**DOCUMENT # N19371** 

1. Entity Name

## FILED Jul 23, 2003 8:00 am Secretary of State

07-09-2003 90036 022 \*\*\*\*61.25

BETHESD DEERFIEL	DA TRUE HOLINESS CHURCH LD BEACH, FLORIDA	1, INCORPORATED, O							
Principal Place of Business 2600 HAMMONDVILLE RD SUITE 16 POMPANO BEACH FL 33069		Mailing Address 2600 HAMMONDVILLE RD SUITE 16 POMPANO BEACH FL 33069			55051945				
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #. etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & State		City & State			4. FEI Number 59-2793866		<del></del>	Applied For Not Applicable	
Zíp	Country	Zip Coi		intry	5. Certificate of Status Desired			\$8.75 Additional Fee Required	
	6. Name and Address of Current	Registered Agent		F	7. Name and Add	ress of New Registered	Agent		1
		تبديد سيار مستاد عراسي	Name						
1260 S.V	I, ARTHUR L V. 5TH AVE.		سعدشه	Street Address (I	P.O. Bóx Number is t	Not Acceptable)			
DEERFIE	LD BEACH FL 33441		•	}			19.5		}
				City		FI	L Zip Co		_
	named entity submits this statement to stone of registered agent. Outhur L. WE	r the purpose of changing its	register	ed office or register	ed agent, or both, in	the State of Florida. I am	familiar with O6/0	, and accept	
CICITAL OTICE	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE	Rég pare	d Agent signature required	when reinstating)	PATE	7		1
	FILE NOW: FEE IS \$61.25 tember 10, 2003, min will be \$2	9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Make Check Payable to Added to Fees Florida Department of State				
10.	OFFICERS AND DIF		11.	<del></del>	ADDITIONS/CHANG	ES TO OFFICERS AND D			֚֚֡֝֞֞֞֞֞֞֞֞֞֞֞֞֩֞֡֡֝֡֡֡֡֡֡֡֡֡֡֡֡֡
TITLE Name	P Watson, Arthur L	☐ Delete	TITUE				☐ Change	Addition	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
STREET ADDRESS	1260 SW 5TH AVE.		.,	ET ADDRESS					27 (
CTTY-ST-ZIP	DEERFIELD BEACH FL 33411			-ST-ZIP					ğ
TITLE	v	☐ Delete	TITLE				☐ Change	☐ Addition	tè
NAME	WATSON, EDNA	معرف	NAM						}
STREET AD DRESS CITY-ST-ZIP	1260 SW 5TH AVE.	7		et address - St-Zip				•	
	DEERFIELD BEACH FL 33411	· ¶	- TITLE		OKI.	<del></del>	D Change	[7] Addition	┨
-NAME	WILSON, PATRICIA-	Delete	= NAME		Set They	7	(=) Clangs	Addition	-
STREET ADDRESS CITY-ST-ZIP	4441 NW (SATH) STREET LAUDERDALE LAKE FL 33311	T		ET ADDRESS 444	1 N. W. 3	AR STEAR	3/1	T	
TITLE	7	☐ Delete	TITLE		24 THE MEL.	- reco	Change	Addition	1
NAME	WILLIAMS, VELMA	-	NAME	E [					{
STREET ADDRESS	325 SW 14TH STREET			ET ADDRESS					
CITY-ST-ZIP	DEERFIELD BEACH FL 33441		<del></del>	ST-ZIP					1
name		Deleta	TITLE				Change	☐ Addition	
STREET ADORESS				ET ADDRESS					1
CITY-ST-ZIP				ST-ZIP					
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NAME	. •		NAME	,					
STREET ADDRESS ( CITY-ST-ZIP				et address St-zip					ļ
	ertify that the information supplied with	this filing does not qualify for t	1		tion 119.07(3)(i). Flo	rida Statutes I further con	tify that the in	nformation	
12. INATED V									

12. I hereby certify that the information supplied with this filling 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 docurate 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 in changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

WARRIANT UR CLESCEL I PHTV HUR L. MISIATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

106/03 427-707