2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21385

Entity Name: BETHEL ASSEMBLY OF GOD, INC.

FILED May 04, 2004 Secretary of State

Current Principal Place of Business: 1225 W. MAIN ST				New Principal Place of Business:		
IMMOKALEE, FL 34142						
Current Mailing Address:			New Maili	New Mailing Address:		
1225 W. MAIN ST IMMOKALEE, FL 34142						
FEI Number: 59-2772511 FEI Number Applied For () FEI Nu			FEI Number Not App	mber Not Applicable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
RINCON, J 604 NASSA IMMOKALE		US				
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:			ADDITION	IS/CHANGES TO	OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD ()E RINCON, JOSUE 604 NASSAU STF IMMOKALEE, FL		Title: Name: Address: City-St-Zip:	PD (X) Ch RINCON, JOSUE 604 NASSAU STRE IMMOKALEE, FL	ange () Addition	
Title: Name: Address: City-St-Zip:	S () E GARCIA, MARY 1 1213 LEE STREE IMMOKALEE, FL	T	Title: Name: Address: City-St-Zip:	S (X) Ch HERNANDEZ, MEL P.O.BOX 3043 IMMOKALEE, FL 3		
Title: Name: Address: City-St-Zip:	TD () E ALVARADO, JOR 5116 DEER RUN IMMOKALEE, FL		Title: Name: Address: City-St-Zip:	() Ch	ange()Addition	
Title: Name: Address: City-St-Zip:	D () E VILLA, JOSE, 509 NEW MARKE IMMOKALEE, FL	elete ET RD.	Title: Name: Address: City-St-Zip:	D (X) Ch VILLA, JOSE 509 NEW MARKET IMMOKALEE, FL	ange () Addition	
Title: Name: Address: City-St-Zip:	D () E VILLA, ANICETO 507 NEW MARKE IMMOKALEE, FL	elete ET RD.	Title: Name: Address: City-St-Zip:	()Ch	ange()Addition	
Title: Name: Address: City-St-Zip:	D () E ALVARADO, JOR 5116 DEER RUN IMMOKALEE, FL		Title: Name: Address: City-St-Zip:	D (X) Ch ALVARADO, JORG 5116 DEER RUN R IMMOKALEE, FL		

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JORGE ALVARADO D 05/04/2004