

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

FILED
Jan 24, 2003 8:00 am
Secretary of State

01-24-2003 90132 032 ****61.25

DOCUMENT # N21385

1. Entity Name

BETHEL ASSEMBLY OF GOD, INC.



Principal Place of Business

**1225 W. MAIN ST
IMMOKALEE FL 34142**

Mailing Address

**1225 W. MAIN ST
IMMOKALEE FL 34142**

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 **59-2772511**

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**RINCON, JOSUE
604 NASSAU STREET
IMMOKALEE FL 34142**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Josue Rincon

1/22/03

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

TITLE	PD	<input type="checkbox"/> Delete
NAME	RINCON, JOSUE	
STREET ADDRESS	604 NASSAU STREET	
CITY-ST-ZIP	IMMOKALEE FL	
TITLE	S	<input type="checkbox"/> Delete
NAME	GARCIA, MARY ANN	
STREET ADDRESS	1213 LEE STREET	
CITY-ST-ZIP	IMMOKALEE FL 34142	
TITLE	TD	<input type="checkbox"/> Delete
NAME	ALVARADO, JORGE	
STREET ADDRESS	5116 DEER RUN RD	
CITY-ST-ZIP	IMMOKALEE FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	VILLA, JOSE	
STREET ADDRESS	509 NEW MARKET RD.	
CITY-ST-ZIP	IMMOKALEE FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	VILLA, ANICETO	
STREET ADDRESS	507 NEW MARKET RD.	
CITY-ST-ZIP	IMMOKALEE FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	ALVARADO, JORGE	
STREET ADDRESS	5116 DEER RUN RD.	
CITY-ST-ZIP	IMMOKALEE FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

Josue Rincon

1/22/03

(239)657 8302

CR2E037 (10/02)