

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N25167 (0)

1. Corporation Name

BETHANY ASSEMBLY OF GOD, INC.



Principal Place of Business

Mailing Address

6/6 DILLY R. DRUMMITT
9812 HARVEY RD.
THONOTOSASSA FL 33592

P.O. BOX 1509
THONOTOSASSA FL 33592

3. Date Incorporated or Qualified
03/03/1988

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 9812 Harvey Rd.

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

City & State

City & State

23 Thonotosassa, FL

28 City & State

Zip Country

Zip Country

24 33592

25

29 33592

30

4. FEI Number
59-2799946

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BARRISS, TERRY R SR
9812 HARVEY RD
THONOTOSASSA FL 33592

81 Name

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

9812 Harvey Rd.

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME BARRISS, TERRY R SR
STREET ADDRESS 1111 SHADOW RUN DR
CITY - ST - ZIP LAKE LAND FL 33813 ☐ DELETE

TITLE VDT
NAME LINDNER, PAUL A
STREET ADDRESS ELM ST
CITY - ST - ZIP SEFFNER FL 33584 ☐ DELETE

TITLE S
NAME BARRISS, DIANA L
STREET ADDRESS 1111 SHADOW RUN DR
CITY - ST - ZIP LAKE LAND FL 33813 ☐ DELETE

TITLE D
NAME DEMPSEY, PATRICK
STREET ADDRESS 1913 148TH AVE E
CITY - ST - ZIP LUTZ FL 33549 ☒ DELETE

TITLE D
NAME KIBBE, JOHN
STREET ADDRESS 13207 N. MCINTOSH RD
CITY - ST - ZIP THONOTOSASSA FL ☐ DELETE

TITLE T
NAME MASIELLO, JOSEPH
STREET ADDRESS 618 WOOD ROAD
CITY - ST - ZIP SEFFNER FL 33584 ☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

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05/28/96 01057 019

***61.25

4/28/96

986 0505

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)