

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Feb 09, 2006 08:00 AM
Secretary of State

DOCUMENT # N29477

1. Entity Name
BETHLEHEM CATHEDRAL, INC.



Principal Place of Business
**8610 NW 17TH AVENUE
MAAMI, F 33147-4276 US**

Mailing Address
**P O BOX 14861
FT LAUDERDALE, FL 33302 US**



02012006 No Chg-NP

CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0096944

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MARTIN, JAMES D
7611 S.W. 8TH STREET
NORTH LAUDERDALE, FL 33068**

**DO NOT WRITE
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	MARTIN, JAMES D.
STREET ADDRESS	3262 N.W. 15TH STREET
CITY-ST-ZIP	FT. LAUDERDALE, FL
TITLE	VD
NAME	RAY, JONNIE C.
STREET ADDRESS	2322 HOOD STREET
CITY-ST-ZIP	HOLLYWOOD, FL
TITLE	SD
NAME	WHITE, JOANNE
STREET ADDRESS	3010 N 23RD AVE
CITY-ST-ZIP	HOLLYWOOD, FL 33020
TITLE	TD
NAME	MARTIN, CARRIE J.
STREET ADDRESS	711 SW 8TH STREET
CITY-ST-ZIP	POMPANO BEACH, FL 33068
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000425770
02/20/06-80015-012 70.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

JAMES D. MARTIN
James D. Martin

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/05/06

Date

(954) 242-9309

Daytime Phone #