


**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Feb 04, 2005 8:00 am
Secretary of State

02-04-2005 90092 002 *****8.75
02-04-2005 90092 001 *****66.25

DOCUMENT # N30531		
1. Entity Name BAPTIST CHURCH OF BETHLEHEM, INC.		
Principal Place of Business 1551 NW 27TH AVE. FORT LAUDERDALE FL 33311		Mailing Address P.O BOX 5941 FORT LAUDERDALE FL 33310
2. Principal Place of Business 319 SW 27 Ave.	3. Mailing Address P.O BOX 5941	
Suite, Apt. #, etc.		Suite, Apt. #, etc.
City & State Ft. Lauderdale FL	City & State Ft. Lauderdale FL	
Zip 33312	Country Broward	Zip 33310
Country Broward		



1st MOORE CR2E037 (10/04)

4. FEI Number 65-0326979		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent METELUS, ONELIEN 5305 NW 16 CT LAUDERHILL FL 33313		7. Name and Address of New Registered Agent Name Onelien-Metelus Street Address (P.O. Box Number is Not Acceptable) 1188 N 3 Rd 7 Apt 401 Lauderhill City FL Zip Code 33313

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 Onelien Metelus (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25 Due By May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input checked="" type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD METELUS, ONELIEN 5305 NW 16TH COURT FORT LAUDERDALE FL 33313 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ONelien Metelus <input type="checkbox"/> Change <input type="checkbox"/> Addition 1188 N 3rd 7 Lauderhill FL 33313
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GEFFRARD, ADIEVLAIRE 5890 NW 14TH CT. SUNRISE FL 33313 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADIELAIRE Geffrard <input type="checkbox"/> Change <input type="checkbox"/> Addition 2440 NW 63ter. SUNRISE FL 33313
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD METELLUS, ONELIEN 5305 NW 16TH COURT SUNRISE FL 33113 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	jaequeleene D. Metelus <input type="checkbox"/> Change <input type="checkbox"/> Addition 1188 N 3 Rd 7 Lauderhill FL 33313
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MOISE, ROSE M 2011 NW 55 AVENUE, APT # 111 LAUDERALE FL 33313 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	EdMER. petit-Homme <input type="checkbox"/> Change <input type="checkbox"/> Addition 3534 NW 33 St Lauderdale Lakes FL 33309
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ETD TANELUS, HYARION 815 NW 12TH AVE.URT FORT LAUDERDALE FL 33311 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TANELUS, HYARION <input type="checkbox"/> Change <input type="checkbox"/> Addition 815 NW 12 AVE. FT. Lauderdale FL 33311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD PETIT-HOMME, DIEULIFETE 3534 NW 33 STREET LAUDERDALE LAKES FL 33311 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PETIT-HOMME DIEULIFETE <input type="checkbox"/> Change <input type="checkbox"/> Addition 3534 NW 33 St Lauderdale Lakes FL 33309

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: Onelien Metelus 01/31/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #