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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N42311

1. Corporation Name

BETHESDA PENTECOSTAL CHURCH, INC.

Principal Place of Business

5296 17TH AVENUE, SOUTHWEST  
NAPLES FL 33999

Mailing Address

5296 17TH AVENUE, SOUTHWEST  
NAPLES FL 33999



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

03/01/1991

4. FEI Number

NOT APPLICABLE

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

9. Name and Address of Current Registered Agent

WORD, LARRY  
2481 4TH AVENUE N.E.  
#A2  
NAPLES FL 34120

10. Name and Address of New Registered Agent

81 Name LARRY WORD

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

2481 4TH AVENUE N.E.

83

84 City NAPLES

FL

85

Zip Code 34120

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

*Larry Word*, LARRY WORD

2/05/99

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 D ☒ DELETE  
NAME DEMOSTHENES, SANDRA  
STREET ADDRESS 5296 17TH AVE, S.W  
CITY-ST-ZIP NAPLES FL

TITLE D ☐ DELETE  
NAME TROUTMAN, LORETTA  
STREET ADDRESS 5296 17TH AVENUE SW  
CITY-ST-ZIP NAPLES FL

TITLE D ☐ DELETE  
NAME FANFAN, SANDRA  
STREET ADDRESS 3903 NORMANDY DRIVE  
CITY-ST-ZIP NAPLES FL 33962

TITLE P ☐ DELETE  
NAME NASH, ROBERT L REV  
STREET ADDRESS 5296 17TH AVE, SW  
CITY-ST-ZIP NAPLES FL

TITLE D ☐ DELETE  
NAME JONES, KATHERINE  
STREET ADDRESS 4780 28TH AVE SW  
CITY-ST-ZIP NAPLES FL 33999

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Katherine Harris*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 8, 1999

Date

1941455-3081

Daytime Phone #

CR2E037 (11/98)