

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # N93000000364

1. Entity Name
FREE BETHLEHEM BAPTIST CHURCH, INC.



Principal Place of Business
714 S.W. FIRST ST
FT. LAUDERDALE, FL 33312 US

Mailing Address
714 S.W. FIRST ST
FT. LAUDERDALE, FL 33312 US



04242007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-3077327	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WILLIAM, PAUL
208 KANSAS AVE
FORT LAUDERDALE, FL 33312

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

(NOTE: Registered Agent signature required when reinstating)

04-25-2007
DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/TR PAUL, WILLIAM 208 KANSAS AVE FORT LAUDERDALE, FL 33312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT THEOPHIN, ROSANA 4561 NW 10 AVE FORT LAUDERDALE, FL 33309
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C DULAMAR, ERMANIE 8019 NW 27TH PLACE FORT LAUDERDALE, FL 33322
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LOUISIANNE, JOSEPH 1851 NW 20 AVE FORT LAUDERDALE, FL 33311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FRERE, VINCENT P 3520 NW 35TH WAY LAUDERDALE LAKES, FL 33309
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000746801
05/16/07-80082-020 61.25

**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: William Paul
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-25-07-954-3282789
Date Daytime Phone #