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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # N93000002438

1. Corporation Name

BETHESDA BIBLE CHURCH, INC.

Principal Place of Business

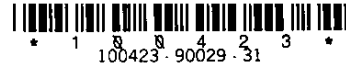
3880 S WASHINGTON
TITUSVILLE FL 32780
US

Mailing Address

3880 S. WASHINGTON
TITUSVILLE FL 32780
US

FILED
Feb 23, 1999 8:00 am
Secretary of State

02-23-1999 90029 031 ****61.25



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

LENGEFELD, STEVE
3073 LANTERN COURT
TITUSVILLE FL 32796

3. Date Incorporated or Qualified

05/24/1993

4. FEI Number

59-3211949

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

10. Name and Address of New Registered Agent

81

Name

THOMURE, ANTHONY R.

82

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

1195 Cleveland St.

83

84

City

Titusville

FL

85 Zip Code
32780

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

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

Anthony Ray Thomure
(NOTE: Registered Agent signature required when reinstating)

DATE

1-3-99

12. OFFICERS AND DIRECTORS

TITLE DP
NAME LEGERFELD, STEVE
STREET ADDRESS 3073 LANTERN CT
CITY-ST-ZIP TITUSVILLE FL 32796 ☒ DELETE

TITLE DV
NAME THOMURE, ANTHONY R
STREET ADDRESS 1195 CLEVELAND ST
CITY-ST-ZIP TITUSVILLE FL 32780 ☐ DELETE

TITLE DS
NAME JEFFERSON, JENNETT
STREET ADDRESS 2534 ORANGE DRIVE
CITY-ST-ZIP MIMS FL 32754 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DP
1.2 NAME Staton, Robert
1.3 STREET ADDRESS 3685 Wood Duck Dr.
1.4 CITY-ST-ZIP Mims, FL 32754 ☒ 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: Anthony Ray Thomure
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

1-3-99

(407) 383-8172

Daytime Phone #

0015270

CR2E037 (11/98)