

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004049

FILED
Apr 30, 2012
Secretary of State

Entity Name: BETHEL ASSEMBLY OF GOD OF MOUNT DORA, INC.

Current Principal Place of Business:

1400 CAMP AVE.
MOUNT DORA, FL 32757 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 515
MOUNT DORA, FL 32757 US

New Mailing Address:

FEI Number: 59-2867493 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WALKER, CHARLES E SPASTOR
1400 CAMP AVE.
MOUNT DORA, FL 32757 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: REV.
Name: WALKER, CHARLES E SPASTOR
Address: 1400 CAMP AVE.
City-St-Zip: MT. DORA, FL 32757

Title: D
Name: PELFREY, MARVOLENE DEACON
Address: 19828 BAY LAKE RD.
City-St-Zip: EUSTIS, FL 32726 US

Title: D
Name: BONSER, JOHN DEACON
Address: 511 LILLIAN CIRCLE
City-St-Zip: EUSTIS, FL 32726 US

Title: D
Name: ROSALIND, BONSER DEACON
Address: 511 LILLIAN CIRCLE
City-St-Zip: EUSTIS, FL 32726 US

Title: D
Name: MARTINEZ, PAULETTE DEACON
Address: 2043 NORTH GRANDVIEW STREET
City-St-Zip: MOUNT DORA, FL 32757 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: CHARLES E. WALKER

REV.

04/30/2012

Electronic Signature of Signing Officer or Director

Date