2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400000357

FILED Jan 07, 2004 Secretary of State

Entity Name: BETHESDA SEVENTH-DAY ADVENTIST MINISTRIES, INC.

Current Principal Place of Business:		New Principal Place o	New Principal Place of Business:		
3880 68TH	HAVENUE NC BPARK, FL 33	PRTH			
Current Mailing Address:		New Mailing Address	New Mailing Address:		
	HAVENUE NC SPARK, FL 33				
FEI Number	: 59-3221248	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
	URIEL A ERA LANE RT RICHEY, FL	_ 34655 US			
	e named entity e of Florida.	submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
	e of Florida.	submits this statement for the	purpose of changing its registered	l office or registered agent, or both,	
in the Stat	e of Florida. RE:	submits this statement for the		office or registered agent, or both, Date	
in the Stat	e of Florida. RE:	nic Signature of Registered Ag	ent		
in the Stati SIGNATU OFFICER Title: Name: Address:	e of Florida. RE: Electron S AND DIREC PD (QUAILEY, URII 6007 RIVIERA	nic Signature of Registered Ag T ORS:) Delete EL A	ent ADDITIONS/CHANGE	Date	
in the Stat	e of Florida. RE: Electron S AND DIREC PD (QUAILEY, URII 6007 RIVIERA NEW PORT RI	nic Signature of Registered Age FTORS:) Delete EL A LANE CHEY, FL 34655) Delete //N OE CT	ent ADDITIONS/CHANGE Title: Name: Address: City-St-Zip:	Date S TO OFFICERS AND DIRECTORS:	

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: URIEL A. QUAILEY PD 01/07/2004