

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 25, 2005 8:00 am
Secretary of State

01-25-2005 90026 022 ****61.25

DOCUMENT # N94000002089

1. Entity Name

BETHEL EVANGELISTIC MINISTRIES, INC.



Principal Place of Business

**101 DOROTHY STREET
INTERLACHEN FL 32148**

Mailing Address

**P.O. BOX 1778
INTERLACHEN FL 32148**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

40005299



1st MOORE

CR2E037 (10/04)

4. FEI Number

59-3246467

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**RODGER, DEBORAH A
101 DOROTHY STREET
INTERLACHEN FL 32148**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

Deborah A. Rodger

Signature, typed or printed name of registered agent and his if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

1-18-2005

FILE NOW: FEE IS \$61.25

Due By May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RODGER, DEBORAH A 101 DOROTHY ST. P.O. BOX 1778 INTERLACHEN FL 32148	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BMD DYER NANCY 101 DOROTHY ST INTERLACHEN FL 32148	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD WENTWORTH, BARBARA A 101 DOROTHY ST. P.O. BOX 1778 INTERLACHEN FL 32148	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DICKIE, JUDY 488 OEKNECK RD HYANNIS MA 02601	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BM NORIS, NICHOLS 304 WOODSIDE RD SIMPSONVILLE SC 29680	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BM GENTLEMAN, VIKI 6887 CR 119 PO BOX 241 BRYCEVILLE FL 32009	<input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Rev. Patricia Vanderembse -VPD 481 DIAD DR ST AUGUSTINE, FL 3286-5900	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Dickie, Judy Sec/Treas 5905 Pinehill Rd Port Richey, FL 34668	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Marla Nichols BM 304 Woodside Rd Simpsonville, SC 29680	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Gentleman, Viki BM 6887 CR 119 PO Box 241 Bryceville, FL 32009	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 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: *Deborah A. Rodger*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-18-2005 386-684-6479

Date

Daytime Phone #

Bethel Evangelistic Ministries, Inc.

Annual Report Section
Division Of Corporation
P.O. Box 1500
Tallahassee, FL 32302-1500

40005299

ATTACHMENT
#N94000002089

RE: Board Of Directors For Bethel Evangelistic Ministries, Inc.

Dear Sir or Madam:

Those who will serving on the Board of Directors of Bethel Evangelistic Ministries, Inc. are as follows:

Board of Directors

Rt. Rev. Deborah A. Rodger, President (D)
101 Dorothy Drive
P.O. Box 1778
Interlachen, FL 32148

Rev. Patricia Vonderembse, Vice President (D)
481 Dino Drive
St. Augustine, FL 3286-5900

Ms. Judy Dickie, Sec/Tres (D)
5905 Pinehill Road
Port Richey, FL 34668

Ms. Viki Gentleman (D)
6887 CR 119 Box 241
Bryceville, FL 32009

If I can be of any further assistance please don't hesitate to call.

Sincerely yours,



Rt. Rev. Deborah A. Rodger, President (January 7, 2005)