

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002100

FILED
Mar 09, 2009
Secretary of State

Entity Name: CHURCH OF GOD OF BETHEL, INC.

Current Principal Place of Business:

3219 N.E. 2ND AVE.
MIAMI, FL 33137

New Principal Place of Business:

Current Mailing Address:

3219 N.E. 2ND AVE.
MIAMI, FL 33137

New Mailing Address:

FEI Number: 65-0493041

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NICOLAS, MARIE MAUDE
3219 N.E. 2ND AVE.
MIAMI, FL 33137 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: PD () Delete
Name: NICOLAS, MARIE MAUDE
Address: 3219 N.E. 2ND AVE.
City-St-Zip: MIAMI, FL 33137

Title: SD () Delete
Name: SAMUEL, GUY B
Address: 410 NW 33 ST
City-St-Zip: MIAMI, FL 33137

Title: TD () Delete
Name: FONTUS, ODETTE
Address: 1620 N.W. 120 ST.
City-St-Zip: MIAMI, FL 33167

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MARIE M NICOLAS

PD

03/09/2009

Electronic Signature of Signing Officer or Director

Date