

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002119

FILED
Jan 27, 2009
Secretary of State

Entity Name: BETHEL AME CHURCH OF PUNTA GORDA, INC.

Current Principal Place of Business:

260 E. OLYMPIA AVE.
PUNTA GORDA, FL 33950

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 512867
PUNTA GORDA, FL 33951

New Mailing Address:

FEI Number: 65-0467209 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CREWS, JAMES REV.
260 E. OLYMPIA AVE.
PUNTA GORDA, FL 33950 US

Name and Address of New Registered Agent:

CREWS, JAMES REV.
260 E. OLYMPIA AVE.
PUNTA GORDA, FL 33950 US

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: REV. JAMES CREWS

01/27/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DAVENPORT, WILLIE
Address: 2585 YUMA AVENUE
City-St-Zip: NORTH PORT, FL 34286

Title: D () Delete
Name: FULTON, DOTTIE RAE
Address: 2473 HERSHEY TERRACE
City-St-Zip: PORT CHARLOTTE, FL 33983

Title: STD () Delete
Name: YOUNG, MARIANNE L
Address: 305-B CAMILLIA LANE
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: DAVENPORT, WILLIE
Address: 2585 YUMA AVENUE
City-St-Zip: NORTH PORT, FL 34286

Title: SD (X) Change () Addition
Name: FULTON, DOTTIE RAE
Address: 2473 HERSHEY TERRACE
City-St-Zip: PORT CHARLOTTE, FL 33983

Title: TD (X) Change () Addition
Name: DAVENPORT, KATHLEEN
Address: 2585 YUMA AVENUE
City-St-Zip: NORTH PORT, FL 34286

Title: D () Change (X) Addition
Name: FULTON, RICHARD
Address: 1411 CARMALITA STREET
City-St-Zip: PUNTA GORDA, FL 33950

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: KATHLEEN DAVENPORT

TD

01/27/2009

Electronic Signature of Signing Officer or Director

Date