

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002908

FILED
Apr 19, 2012
Secretary of State

Entity Name: HOUSE OF BETHEL SPIRIT OF TRUTH, INC.

Current Principal Place of Business:

3658 ROBENA ROAD
JACKSONVILLE, FL 322182906 US

New Principal Place of Business:

Current Mailing Address:

HOUSE OF BETHEL SPIRIT TRUTH, INC.
3528 ARMSTRONG ST.
JACKSONVILLE, FL 322183179 US

New Mailing Address:

FEI Number: 59-3272371

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOWLING, BARBARA PASTOR
3528 ARMSTRONG ST.
JACKSONVILLE, FL 322183179 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
Name: DOWLING, BARBARA
Address: 3528 ARMSTRONG ST
City-St-Zip: JACKSONVILLE, FL 322183179 US

Title: VD
Name: ALLEN, DAVID
Address: 421 B SOUTH 14TH ST
City-St-Zip: FERNANDINA BEACH, FL 32034 US

Title: T
Name: GREENE, BESSIE
Address: 3528 ARMSTRONG STREET
City-St-Zip: JACKSONVILLE, FL 322183179 US

Title: MD
Name: NELSON, ETHEL
Address: 3528 ARMSTRONG STREET
City-St-Zip: JACKSONVILLE, FL 322183179 US

Title: S
Name: ALLEN, TOMEICA
Address: 4239 KEY ADAM DRIVE
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: DT
Name: STEWART, RUEBEN
Address: 5911 N PEARL ST
City-St-Zip: JACKSONVILLE, FL 32208 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: BARBARA DOWLING

PD

04/19/2012

Electronic Signature of Signing Officer or Director

_____ Date