

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003430

FILED
Apr 29, 2008
Secretary of State

Entity Name: SANFORD EL BETHEL TEMPLE, CORP.

Current Principal Place of Business:

915 W. 3RD STREET
SANFORD, FL 32771

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2730
SANFORD, FL 327722730

New Mailing Address:

FEI Number: 59-3243035

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ARRINGTON, WILLIE D
4502 EVERS PLACE
ORLANDO, FL 32811 US

Name and Address of New Registered Agent:

ARRINGTON, WILLIE D
1838 WINDMILL DR
ORLANDO, FL 32818 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:

04/29/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ARRINGTON, WILLIE DAVID
Address: 4502 EVERS PLACE
City-St-Zip: ORLANDO, FL 32811

Title: D () Delete
Name: JAMES L. JOSEPH,
Address: 4320 CYNTHIA ST.
City-St-Zip: ORLANDO, FL

Title: SD () Delete
Name: JOSEPH, CYNTHIA
Address: 4320 CYNTHIA STREET
City-St-Zip: ORLANDO, FL 32811

Title: CFD () Delete
Name: YOUNG, WILLIE M
Address: 1820 N. POWERS DRIVE
City-St-Zip: ORLANDO, FL 32818

Title: TD () Delete
Name: WILLIAMS, MONA L
Address: 4735 N. PINE HILLS ROAD
City-St-Zip: ORLANDO, FL 32808

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ARRINGTON, WILLIE DAVID
Address: 1838 WINDMILL DR
City-St-Zip: ORLANDO, FL 32818

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

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

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

Title: TD (X) Change () Addition
Name: WILLIAMS, MONA L
Address: 6512 JOHN ALDEN WAY
City-St-Zip: ORLANDO, FL 32818

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: WILLIE MAE YOUNG

CFD

04/29/2008

Electronic Signature of Signing Officer or Director

Date