FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT #

N95000000859 (7)

STAR OF BETHLEHEM CHURCH OF GOD FIRSTBORN INC.

											
Principal Place of Business Mailing Address										,, 6,,,,,	
3376 W BROWARD BLVD FT LAUDERDALE FL 33311				3200 NW 41 ST LAUDERDALE LAKES FL 33309-4937							
								3. Date Incorporated or Qualified 02/21/1995	3a. Date of Last 01/29/19	Report 996	
2. Principal Place of Business				2a. Mailing Address				4. FEI Number	<u> </u>	Applied For	
21			26					65-0557713		Not Applicable	
Suite, Apt #, etc.				Suite, Apt. #, etc				5. Certificate of Status Desired S8.75 Additional Fee Required			
City & State				City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip		Country		Zip		Country		8. This corporation has liability for	intangible tax under	s. 199.032,	
24	25 29 30				Florida Statutes Yes No						
Name and Address of Current Registered Agent								10. Name and Address of New Re	gistered Agent		
						61	Name				
BURRIS, JOCELYN				1			Street Add	Address (P.O. Box Number is Not Acceptable)			
3200 NW 41 ST LAUDERDALE LAKES FL 33309						83					
Broden .	DUFF DAIR	.0 1 2 00000							71		
ł						84	City		FL 85 Zi	p Code	
11. Pursuant	to the provis	ions of Sections 617	.0502 and 6	17.1508, Florida	Statutes, th	e above	-named cor	poration submits this statement for the p	ourpose of changing	its registered	
office or r	registered aç ım familiar wi	jent, or both, in the S ith, and accept the o	itate of Flori bligations o	da. Such change if Section 617 050	was author 33. Florida i	rized by Statutes	the corpora	ation's board of directors. I hereby acce	pt the appointment a	as registered	
		,,,, ш., ш. ш. ш.		.,							
SIGNATURE .	Signature, typed	or printed name of registers	d agent and tit	if applicable	(NOTE: Regis	stered Age	nt signature requ	uirad when reinstating)	DATE		
12.		OFFICERS	AND DIRE	CTORS		13.		ADDITIONS/CHANGES TO OFFIC			
TITLE	PD			☐ DELET	E 1	1.1 TITLE			Change	e	
NAME	BURRIS,	JOCELYN			1	1.2 NAME	İ				
STREET ADDRESS 3200 NW 41 ST				1.3 STREE			ADDRESS				
CITY-ST-ZIP	LAUDER	DALE LAKES FL 3	33309		1	1.4 CITY - S	T-ZIP				
TITLE	S			☐ DELET	E 2	2.1 TITLE			☐ Change	e 🔲 Addition	
NAME	ESDELLI	e, thomas			7	2.2 NAME		·			
STREET ADDRESS 3200 NW 41 ST.							ADDRESS				
CITY-ST-ZIP	LAUDER	DALE LAKES FL	33309			2. 4 CITY - S	ST-ZIP				
TITLE	D			DELET	£ 3	3.1 TITLE			Change	e 🔲 Addition	
NAME		Y, MARRIETTA			3	3.2 NAME					
STREET ADDRESS		BROWARD BLVD				3.3 STREET	address				
CITY-ST-ZIP		DERDALE FL 3331	1			3.4. CITY - S	ST-ZIP				
TITLE	TD			☐ DELE1	E 4	4.1 TITLE			Change	e Addition	
NAME	EDMON					4. 2 NAME					
STREET ADDRESS		V 41 ST.				4.3 STREET	ADDRESS				
CITY - ST - ZIP	LAUDER	DALE LAKES FL :	33309			4.4 CITY - S	T-ZIP				
TITLE	T			☐ DELET	E ;	5.1 TITLE			Change	e Addition	
NAME		IL, LORS				5 2 NAME					
STREET ADDRESS	4431 NV					5.3 STREET	ADDRESS				
CITY-ST-ZIP	FT LAU	DERDALE FL 3330	9			5.4 CITY <u>-</u> S	iT-ZIP				
TITLE				☐ DELET	Œ e	6.1 TITLE		- "	Change	e Addition	
NAME					6	6.2 NAME					
STREET ADDRESS					f	6.3 STREET	ADDRESS				

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address.

6.4 CITY - ST - ZIP

STREET ADDRESS CITY-ST-ZIP

FILED

Jan 23 1997 8:00am

Secretary of State

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