

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 21, 2006 8:00 am
Secretary of State

03-21-2006 90050 032 ****61.25

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1. Entity Name

**BETHLEHEM BAPTIST CHURCH, INC. OF PALM BEACH
COUNTY**



Principal Place of Business

**5000 PURDY LN
WEST PALM BEACH FL 33415**

Mailing Address

**5000 PURDY LN
WEST PALM BEACH FL 33415**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

65-0136060

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**GIBSON, EUNICE B
1046 - 36TH STREET
WEST PALM BEACH FL 33407**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **P**
STREET ADDRESS **STEWART, GILBERT W**
CITY-ST-ZIP **5147 GLEN COVE LANE
WEST PALM BEACH FL**

TITLE ☐ Delete
NAME **S**
STREET ADDRESS **MCCRAY, ROCHUN**
CITY-ST-ZIP **2456 LENA LANE
WEST PALM BEACH FL 33415**

TITLE ☐ Delete
NAME **VP**
STREET ADDRESS **GAINES, WILLIE JR**
CITY-ST-ZIP **4651 WENHART RD.
LAKE WORTH FL 33463**

TITLE ☐ Delete
NAME **T**
STREET ADDRESS **GIBSON, EUNICE**
CITY-ST-ZIP **1046 36TH STREET
WEST PALM BEACH FL 33407**

TITLE ☐ Delete
NAME **T**
STREET ADDRESS **ROLLE, ROBERTA**
CITY-ST-ZIP **1382 13TH STREET
W.P. BCH FL**

TITLE ☐ Delete
NAME **T**
STREET ADDRESS **JOHNSON, EVELYN**
CITY-ST-ZIP **1417 W. 8TH ST
RIVIERA BCH FL 33404**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Rev. G. W. Stewart*

FLB 5, 06 561-969-0766