2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2009
Secretary of State

DOCUMENT# N95000005024

Entity Name: ASSEMBLY OF GOD - BETHLEHEM MINISTRY, INC.

Current Principal Place of Business:

4000 N FEDERAL HWY
LIGHTHOUSE POINT, FL 33064 US

New Principal Place of Business:

Current Mailing Address:

4000 N FEDERAL HWY
LIGHTHOUSE POINT, FL 33064 US

New Mailing Address:

FEI Number: 65-0616904 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TAX HOUSE CORPORATION
1100 SOUTH FEDERAL HWY
2ND FLOOR
DEERFIELD BEACH, FL 33064 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 ( ) Delete
Name: COSTA, JOEL F
Address: 4000 N FEDERAL HWY
City-St-Zip: LIGHTHOUSE POINT, FL 33064 US

Title: VD ( ) Delete
Name: PEREIRA, ANTHONY L
Address: 4000 N FEDERAL HWY
City-St-Zip: LIGHTHOUSE POINT, FL 33064 US

Title: VD ( ) Delete
Name: VASCONCELOS, JOSEPH A
Address: 4000 N FEDERAL HWY
City-St-Zip: LIGHTHOUSE POINT, FL 33064 US

Title: TD ( ) Delete
Name: AGUIAR, ISMAEL V
Address: 4000 N FEDERAL HWY
City-St-Zip: LIGHTHOUSE POINT, FL 33064 US

Title: TD ( ) Delete
Name: PEREIRA, CLAUDIO S
Address: 4000 N FEDERAL HWY
City-St-Zip: LIGHTHOUSE POINT, FL 33064 US

Title: SD ( ) Delete
Name: DOS SANTOS, NATANAEL
Address: 4000 N. FEDERAL HWY
City-St-Zip: POMPANO BEACH, FL 33064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change ( ) Addition
Name: SOLANO-COSTA, HUMBERTO E
Address: 4000 N FEDERAL HWY
City-St-Zip: LIGHTHOUSE POINT, FL 33064 US

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

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: JOEL F COSTA PD 02/06/2009

Electronic Signature of Signing Officer or Director — Date