## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N95000005503

Apr 04, 2009 Secretary of State

Entity Name: BETHEL CHRISTIAN CHURCH OF NEWBERRY, INC.

**Current Principal Place of Business: New Principal Place of Business:** 4600 NW 143RD STREET GAINESVILLE, FL 32606 US **Current Mailing Address: New Mailing Address:** 4600 NW 143RD STREET GAINESVILLE, FL 32606 US FEI Number: 59-3344416 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PASTOR, AARON B ROLLINS 17027 NW 46TH AVENUE ALACHUA, FL 32615 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete YOUNG, CLYDE YOUNG, CLYDE DEACON Name: Name: 15810 SW 103 AVENUE Address: 15810 SW 103 AVENUE Address: City-St-Zip: ARCHER, FL 32618 City-St-Zip: ARCHER, FL 32618 Title: () Delete Title: (X) Change ( ) Addition Name: DURDLEY, BETTY Name: DURDLEY, BETTY SISTER Address: 16227 SW 95TH AVE Address: 16227 SW 95TH AVE City-St-Zip: ARCHER, FL 32618 City-St-Zip: ARCHER, FL 32618 Title: () Delete Title: (X) Change ( ) Addition ROLLINS, AARON B ROLLINS, AARON B PASTOR Name: Name: 17027 NW 46TH AVENUE 17027 NW 46TH AVENUE Address: Address: City-St-Zip: ALACHUA, FL 32615 City-St-Zip: ALACHUA, FL 32615 Title: () Delete Title: ( ) Change (X) Addition Name: Name: DUKES, JAMES DEACON 2929 NE 16TH DRIVE Address: Address: City-St-Zip: City-St-Zip: GAINESVILLE, FL 32609

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: AARON B. ROLLINS D 04/04/2009