

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000130

FILED
Apr 19, 2010
Secretary of State

Entity Name: BETHESDA CHURCH MINISTRIES, INC.

Current Principal Place of Business:

14120 NW 7TH AVE
MIAMI, FL 33168

New Principal Place of Business:

Current Mailing Address:

14120 NW 7TH AVE
MIAMI, FL 33168

New Mailing Address:

FEI Number: 65-0709404

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BIEN-AIME, MICHEL
16440 NE 10TH AVE.
NORTH MIAMI BEACH, FL 33162 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
Name: FRANCOIS, SEBASTIEN MIN.
Address: 10160 TORCHWOOD AVE
City-St-Zip: PLANTATION, FL 33324 US

Title: PDCO
Name: GASPARD, MAXON REV./DR
Address: 870 NW
City-St-Zip: 203 STREET, FL 33169 US

Title: VD
Name: BIEN-AIME, MICHEL
Address: 16440 N.E 10TH AVE
City-St-Zip: MIAMI, FL 33162 US

Title: OD
Name: CHARITABLE, AUGUSTIN
Address: 771 MW 148TH ST.
City-St-Zip: MIAMI, FL 33166

Title: TD
Name: DESROCHES, GHISLAINE
Address: 505 MW 158TH STREET
City-St-Zip: N. MIAMI BEACH, FL 33162

Title: SD
Name: COULANGES, MARIE L PASTOR
Address: 431 NW 131TH ST.
City-St-Zip: MIAMI, FL 33168

I hereby 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 all other like empowered.

SIGNATURE: DR. MAXON GASPARD, SENIOR PASTOR

PD

04/19/2010

Electronic Signature of Signing Officer or Director

Date