

FILE NOW: FILING FEE IS \$61.25

FILED
May 14 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N96000001829 (8)
1. Corporation Name
BETHEL BAPTIST CHURCH OF APOPKA, INC.



Principal Place of Business 344 E 13TH STREET APOPKA FL 32703	Mailing Address 344 E 13TH STREET APOPKA FL 32703-4000
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2. Principal Place of Business 21 914 S. Park Ave.	2a. Mailing Address 26 914 S. Park Ave
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State Apopka, FL.	28 City & State Apopka, FL.
24 Zip 32703	25 Country USA
29 Zip 32703	30 Country USA

3. Date Incorporated or Qualified 01/17/1995	3a. Date of Last Report 05/02/1996
4. FEI Number NOT APPLICABLE	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**CHARLTON, BEVERLY
344 E 13TH STREET
APOPKA FL 32703**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CARTER, JOE	1.2 NAME	
STREET ADDRESS	133 E 13TH ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	APOPKA FL 32703	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHARLTON, SAMUEL	2.2 NAME	
STREET ADDRESS	344 E 13TH STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	APOPKA FL 32703	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHARLTON, BEVERLY	3.2 NAME	
STREET ADDRESS	344 E 13TH STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	APOPKA FL 32703	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	Dulysse Carter
STREET ADDRESS		4.3 STREET ADDRESS	814 S. LAKE AVENUE
CITY-ST-ZIP		4.4 CITY-ST-ZIP	APOPKA, FL. 32703
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	Beverly Carter
STREET ADDRESS		5.3 STREET ADDRESS	814 S. LAKE AVENUE
CITY-ST-ZIP		5.4 CITY-ST-ZIP	APOPKA, FL. 32703
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	Fannie Jackson
STREET ADDRESS		6.3 STREET ADDRESS	591 MARDEN MEADOWS
CITY-ST-ZIP		6.4 CITY-ST-ZIP	APOPKA, FL. 32703

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.

SIGNATURE: *Beverly J. Charlton* (407) 889-4050

CR2E037 (9/96)