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Mar 20 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N96000002666 (3)
1. Corporation Name
BETHEL ASSEMBLY OF GOD CHURCH, INC.



Principal Place of Business BETHEL A/G CHURCH INC 119 CR 315 N INTERLACHEN FL 32148 US	Mailing Address PO BOX 1028 INTERLACHEN FL 32148
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3. Date Incorporated or Qualified 05/20/1996	
4. FEI Number 59-2477138	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	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Country
24. Country	29. Zip
25. Country	30. Country

Same as above

9. Name and Address of Current Registered Agent

**FOSTER, JERRY
119 CR 315 N
INTERLACHEN FL 32148**

10. Name and Address of New Registered Agent

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

Same

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 *Jerry Foster* **SECRETARY** DATE **3/9/98**

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	MOBLEY, BOBBY L	
STREET ADDRESS	111 CRESTWOOD DRIVE	
CITY-ST-ZIP	INTERLACHEN FL	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	WAINWRIGHT,	
STREET ADDRESS	PO BOX 183 N/A	
CITY-ST-ZIP	INTERLACHEN FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	FOSTER, JERRY	
STREET ADDRESS	RT 4, BOX 458	
CITY-ST-ZIP	INTERLACHEN FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	HARRISON, BILL	
STREET ADDRESS	RT 2 BOX 497D N/A	
CITY-ST-ZIP	INTERLACHEN FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	WEAVER, TROY	
STREET ADDRESS	127 OAK DR	
CITY-ST-ZIP	INTERLACHEN FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	TD LLOYD FOX
2.3 STREET ADDRESS	231 DAVID AVE
2.4 CITY-ST-ZIP	Interlachen, FL 32148
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	SD Jerry Foster
3.3 STREET ADDRESS	139 MANGLES DRIVE
3.4 CITY-ST-ZIP	Interlachen FL 32148
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	D Bill Harrison
4.3 STREET ADDRESS	161 PINE DR
4.4 CITY-ST-ZIP	Interlachen FL
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I 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: *[Signature]* DATE: **3/9/98** (907) 654-6178

CR2E037 (10/97)