

2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

FILED
Apr 25, 2008 08:00 AM
Secretary of State

DOCUMENT # N96000005138

1. Entity Name
THE BETHEL COMMUNITY FOUNDATION, INC.



Principal Place of Business
2901 54TH AVE SOUTH
SAINT PETERSBURG, FL 33712

Mailing Address
2901 54TH AVE SOUTH
SAINT PETERSBURG, FL 33712



04222008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3391995	Applied For Not Applicable
-----------------------------	-------------------------------

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SYKES, MANUEL L
2901 54TH AVENUE SOUTH
SAINT PETERSBURG, FL 33712

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO SYKES, MANUEL L 2901 54TH AVENUE SOUTH SAINT PETERSBURG, FL 33712
--	---

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MYLES, JAMES 761 54TH AVENUE SOUTH SAINT PETERSBURG, FL 33705
--	--

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, BRENT 6800 16TH WAY SOUTH SAINT PETERSBURG, FL 33712
--	--

TITLE NAME STREET ADDRESS CITY-ST-ZIP	T TELLIS, JEROME 1843 58TH CIRCLE SOUTH SAINT PETERSBURG, FL 33712
--	---

TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SIMS, ZEKE P.O. BOX 14112 SAINT PETERSBURG, FL 33733
--	---

TITLE NAME STREET ADDRESS CITY-ST-ZIP	S THOMPSON, EVELYN 2411 44TH STREET SOUTH SAINT PETERSBURG, FL 33711
--	---

U00000923099
05/16/08-80018-002 81.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

JAMES MYLES JAMES MYLES Executive Director 4/25/2008 727 866-2747