

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006374

FILED
Feb 25, 2008
Secretary of State

Entity Name: THE BETHANY BAPTIST CHURCH CEMETARY MAINTENANCE FUND, INC.

Current Principal Place of Business:

26618 STATE ROAD 64 EAST
MYAKKA CITY, FL 34251

New Principal Place of Business:

Current Mailing Address:

26618 STATE ROAD 64 EAST
MYAKKA CITY, FL 34251

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HARRISON, G. JOSEPH
1206 MANATE AVE. WEST
BRADENTON, FL 34205 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: D () Delete
Name: HENDRY, A.O.
Address: 2210 RICH ROAD
City-St-Zip: MYAKKA CITY, FL 34251

Title: D () Delete
Name: HINE, CLYDE
Address: 3135 NORTH RYE ROAD
City-St-Zip: PARRISH, FL 34219

Title: D () Delete
Name: WINGATE, RODNEY
Address: 26618 STATE ROAD 64 EAST
City-St-Zip: MYAKKA CITY, FL 34251

Title: D () Delete
Name: WINGATE, JACQUELYN W
Address: 26618 STATE ROAD 64 EAST
City-St-Zip: MYAKKA CITY, FL 34251

Title: D () Delete
Name: WINGATE, DEAN
Address: 27248 SR 64 EAST
City-St-Zip: MYAKKA CITY, FL 34251

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: CANNON, JANIE
Address: 26618 STATE ROAD 64 EAST
City-St-Zip: MYAKKA CITY, FL 34251

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: G. JOSEPH HARRISON

RA

02/25/2008

Electronic Signature of Signing Officer or Director

_____ Date