

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2003 8:00 am
Secretary of State

05-06-2003 90021 029 ****61.25

DOCUMENT # N97000000135

1. Entity Name

EL BETHEL ASSEMBLY OF GOD CHURCH, INC.



Principal Place of Business

**2503 EL BETHEL ROAD
GRAND RIDGE FL 32442**

Mailing Address

**2503 EL BETHEL ROAD
GRAND RIDGE FL 32442**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2228502**

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PARRISH, RICHARD
2503 EL BETHEL CHURCH ROAD
GRAND RIDGE FL 32442**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Richard Parrish
Richard Parrish

4-30-03

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete
NAME **COULLETTE, DAN**
STREET ADDRESS **8158 HAWLEY**
CITY-ST-ZIP **SNEADS FL 32460**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☒ Delete
NAME **GOODWIN, HOWARD**
STREET ADDRESS **8269 SHADY GROVE ROAD**
CITY-ST-ZIP **SNEADS FL 32460**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **DUNHAM, HAROLD**
STREET ADDRESS **2075 MORGAN LOOP**
CITY-ST-ZIP **SNEADS FL 32460**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **HILL, CHARLES**
STREET ADDRESS **7205 HWY 90**
CITY-ST-ZIP **GRAND RIDGE FL 32442**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **BISHOP, CRAIG**
STREET ADDRESS **6347 EXPRESS ROAD**
CITY-ST-ZIP **GRAND RIDGE FL 32442**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 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:

Dan Coulliette
SIGNATURE REQUIRED

Dan Coulliette

4-30-03 850-593-6044

CR2E037 (10/02)