

6-18-98 B 7949 C
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FILED
 Jun 18 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 # N97000005373 (2)
 1. Corporation Name
BETHANY TEMPLE CHURCH OF GOD, TARPON SPRINGS, IN C.



Principal Place of Business 401 NORTH DISSTON AVENUE TARPON SPRINGS FL 34689	Mailing Address 401 NORTH DISSTON AVENUE TARPON SPRINGS FL 34689
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3. Date incorporated or Qualified 09/22/1997	
4. FEI Number 59-2265812	Applied For <input type="checkbox"/> Not Applicable

2. Principal Place of Business 21 P.O. Box 429 Suite, Apt. #, etc.	2a. Mailing Address 26 P.O. Box 429 Suite, Apt. #, etc.
22 City & State Tarpon Springs, FL	27 City & State Tarpon Springs, FL
23 Zip 34688-0429	24 Country Pinellas
25 Zip 34688-0429	26 Country Pinellas

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	

9. Name and Address of Current Registered Agent
**DEFINO, F D
 401 NORTH DISSTON AVENUE
 TARPON SPRINGS FL 34689**

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		DELETED
TITLE	P	<input type="checkbox"/>
NAME	DE FINO, DONALD	
STREET ADDRESS	5706 IVY LANE	
CITY-ST-ZIP	HOLIDAY FL 34690	
TITLE	T	<input type="checkbox"/>
NAME	Morris Dixon	
STREET ADDRESS	3427 Tiki Drive	
CITY-ST-ZIP	Holiday, Fl. 34690	
TITLE	T	<input type="checkbox"/>
NAME	Verlon Wells	
STREET ADDRESS	4715 Madison Ave.	
CITY-ST-ZIP	Newport Richy, Fl. 34652	
TITLE	T	<input type="checkbox"/>
NAME	Larry Smith	
STREET ADDRESS	2376 Bentley Drive	
CITY-ST-ZIP	Palm Harbor, Fl. 34684	
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Change	Addition
1.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP			
2.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
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: *Donald DeFino* **DONALD DEFINO**

CR2E037 (10/97)