

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006875

FILED
Mar 03, 2008
Secretary of State

Entity Name: BETHSAIDA TEMPLE MINISTRIES, INC.

Current Principal Place of Business:

1544 WEST 22ND STREET
JACKSONVILLE, FL 32209 US

New Principal Place of Business:

Current Mailing Address:

1415 PINE GROVE AVE.
JACKSONVILLE, FL 32205 US

New Mailing Address:

204 HALIFAX DR
WOODBINE, GA 31569 US

FEI Number: 59-3482168

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILSON, WAYNE L SR.
1415 PINEGROVE AVE.
JACKSONVILLE, FL 32205 US

Name and Address of New Registered Agent:

WILSON, WAYNE L SR.
204 HALIFAX DR
WOODBINE, FL 31569 US

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: WAYNE L.WILSON SR

03/03/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WILSON, WAYNE L SR.
Address: 1415 PINEGROVE AVE
City-St-Zip: JACKSONVILLE, FL 32205

Title: T () Delete
Name: BARNES, PATRICIA
Address: 1549 WEST 22ND STREET
City-St-Zip: JACKSONVILLE, FL 32206

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WILSON, WAYNE L SR.
Address: 204 HALIFAX DR
City-St-Zip: WOODBINE, GA 31569

Title: T (X) Change () Addition
Name: WILSON, BEVERLY
Address: 204 HALIFAX DR
City-St-Zip: WOODBINE, GA 31569

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: WAYNE L WILSON SR

PD

03/03/2008

Electronic Signature of Signing Officer or Director

Date