

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2002 8:00 am
Secretary of State

05-16-2002 90064 002 ****70.00

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1. Entity Name

BETHEL ASSEMBLY OF GOD OF OKEECHOBEE, INC.

Principal Place of Business
**1109 SE 7TH STREET,
 OKEEXHOBEE, FL., 34974,
 US.**

Mailing Address
**P.O. BOX 1229
 OKEECHOBEE, FL., 34973**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0879217**

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

**CHARLES E. LAMB,
 3617 SW 13TH TERRACE,
 OKEECHOBEE,
 FL., 34974.**

Name _____
 Street Address (P.O. Box Number is Not Acceptable) _____
 City _____
 State **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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

2002-05-16 09:00:00
 Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PD	LAMB, CHARLES E.	3617 SW 13TH TERR	OKEECHOBEE FL 34974	<input type="checkbox"/>
VD	PRITCHARD, LOWELL	32801 HWY. 441 N.	OKEECHOBEE, FL., 34972.	<input checked="" type="checkbox"/>
TD	BURK, DONALD D.	402 SW 11 TH AVENUE,	OKEECHOBEE, FL., 34974	<input type="checkbox"/>
SD	BRIOSCHI, EUGENE	32801 HWY. 441 N.	OKEECHOBEE, FL., 34972	<input checked="" type="checkbox"/>
D	WHITAKER, DONALD	2075 SW 21 ST STREET,	OKEECHOBEE, FL., 34974	<input checked="" type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
VD	VANDERHOFF, RONALD	12302 HWY. 441 SE	OKEECHOBEE, FL, 34974	<input type="checkbox"/>	<input checked="" type="checkbox"/>
SD	VANDERHOFF, JERRY	6476 HWY. 441 SE	OKEECHOBEE, FL, 34974	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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

C. E. Lamb.

4.29.2002

(863) 467 0123