## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000005494

FILED Apr 08, 2004 Secretary of State

Entity Name: BETHEL ASSEMBLY OF GOD OF OKEECHOBEE, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
1109 SE 7TH ST. OKEECHOBEE, FL 34973					
Current M	ailing Addres	s:	New Maili	New Mailing Address:	
PO BOX 1229 OKEECHOBEE, FL 34973					
FEI Number: 65-0879217 FEI Number Applied For ( ) FEI Number			FEI Number Not App	mber Not Applicable ( ) Certificate of Status Desired (X)	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
LAMB, C. EDWARD 3617 S.W. 13TH TERRACE OKEECHOBEE, FL 34973 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:					
Electronic Signature of Registered Agent			t	Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () LAMB, C. EDWA 3617 S.W. 13TH OKEECHOBEE,	TERRACE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	VD () KLANKE, RALPH 4477 SE 22ND ( OKEECHOBEE,	COURT	Title: Name: Address: City-St-Zip:	VSD (X) Change ( ) Addition KLANKE, RALPH 4477 SE 22ND COURT OKEECHOBEE, FL 34974	
Title: Name: Address: City-St-Zip:	D () BRANHAM, DEB 8005 SW 21ST OKEECHOBEE,	PARKWAY	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	T () KLANKE, JEAN 4477 SE 22ND 0 OKEECHOBEE,		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition LOWRY, BERTHA 899 NE 46TH TERRACE OKEECHOBEE, FL 34972	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: C. EDWARD LAMB PD 04/08/2004