


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2006 8:00 am
Secretary of State

04-25-2006 90112 025 ****70.00

DOCUMENT # N98000005494

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



Principal Place of Business
 1109 SE 7TH ST.
 OKEECHOBEE, FL 34974

Mailing Address
 PO BOX 1229
 OKEECHOBEE, FL 34973

2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

Zip Country Zip Country



03212006 Chg-NP CR2E037 (11/05)

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

LAMB, C. EDWARD
 3617 S.W. 13TH TERRACE
 OKEECHOBEE, FL 34974

7. Name and Address of New Registered Agent

Name BRANHAM, Deborah
 Street Address (P.O. Box Number is Not Acceptable)
8005 S.W. 21st PARKWAY
 City OKEECHOBEE FL Zip Code 34974

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 Deborah Branham Chairman DATE 4-9-06

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2006

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

| | | |
|--|---|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD LAMB, C. EDWARD 3617 S.W. 13TH TERRACE OKEECHOBEE, FL 34974 | <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VSD KLANKE, RALPH 4477 SE 22ND COURT OKEECHOBEE, FL 34974 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D BRANHAM, DEBORAH 8005 SW 21ST PARKWAY OKEECHOBEE, FL 34974 | <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T KLANKE, JEAN 4477 SE 22ND COURT OKEECHOBEE, FL 34974 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D LOWRY, BERTHA 899 NE 46TH TERRACE OKEECHOBEE, FL 34972 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| | | |
|--|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P/C/D BRANHAM, Deborah 8005 SW 21st Pkwy. Okeechobee, FL, 34974 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Deborah Branham DATE 4-9-06 Daytime Phone # 863-763-6583

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR