


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N99000001341 1. Entity Name EL BETHEL MISSIONARY CORP.	
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FILED
08 OCT -1 PM 2:46

SECRETARY OF STATE
ALLAHASSEE, FLORIDA

Principal Place of Business 3681 NW 29 STREET LAUDERDALE LAKES, FL 33311	Mailing Address 3681 NW 29 STREET LAUDERDALE LAKES, FL 33311
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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08252008 Chg-NP CR2E037 (12/06)

City & State Zip Country	City & State Zip Country
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4. FEI Number 65-0909506	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent LAMBERT, CLEOMIE DP 3681 NW 29 STREET LAUDERDALE LAKES, FL 33311	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by September 12, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	DP LAMBERT, CLEOMIE PASTOR 3681 NW 29 STREET LAUDERDALE LAKES, FL 33311	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition 500136577185 10/02/08--01036--016 **\$61.25
TITLE	VP LUNIE, JOSEPH 3501 NW 33 STREET LAUDERDALE LAKES, FL 33309	TITLE	<i>Pierre Marc A VP</i> <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE	S DELICEY, SHERLIE 3467 NW 37 ST LAUD LAKES, FL 33309	TITLE	<i>Sean Celinus S</i> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE	T ISMA, GENELIA 4230 NE 4 TERR POMPANO, FL 33064	TITLE	<i>Sherie Delicey AT</i> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	AV CONSTANT, CARL 6911 SW 8 STREET MARGATE, FL 33068	TITLE	<i>Leswil Bonamy AS</i> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition 500136577185 10/02/08--01036--017 **\$8.75

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:  DATE: 9-22-08 DAYTIME PHONE #: 954-599-0244