

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000006440

**FILED**  
**Feb 02, 2012**  
**Secretary of State**

**Entity Name:** THE BUNNELL APOSTOLIC CHURCH OF GOD, INC.

**Current Principal Place of Business:**

500 N. PINE STREET  
BUNNELL, FL 32110

**New Principal Place of Business:**

**Current Mailing Address:**

500 N. PINE STREET (P.O. BOX 1420)  
BUNNELL, FL 32110

**New Mailing Address:**

500 N. PINE STREET  
BUNNELL, FL 32110

**FEI Number:** 59-3626794

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CAMPETELLA, GERALD M  
500 N. PINE STREET  
BUNNELL, FL 32110 US

**Name and Address of New Registered Agent:**

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: S  
Name: CAMPETELLA, MARTHA  
Address: 36 JUNIPER PASS LANE  
City-St-Zip: OCALA, FL 34480

Title: T  
Name: BROWN, JOSEPH  
Address: 12 BLAKEFIELD DRIVE  
City-St-Zip: PALM COAST, FL 32137

Title: T  
Name: PRITCHARD, DAVID  
Address: 6 LYNTON PLACE  
City-St-Zip: PALM COAST, FL 32137

Title: T  
Name: LOPEZ, ANGEL  
Address: 11 POST LANE  
City-St-Zip: PALM COAST, FL 32164

I hereby 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 all other like empowered.

SIGNATURE: DAVID PRITCHARD

REV.

02/02/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date