

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 728234

**FILED**  
**Feb 12, 2013**  
**Secretary of State**  
**CC2050284002**

**Entity Name:** GREATER ISRAEL BETHEL PRIMITIVE BAPTIST CHURCH

**Current Principal Place of Business:**

160 NORTHWEST 18TH ST.  
MIAMI, FL 33136-1718

**Current Mailing Address:**

160 NORTHWEST 18TH ST.  
MIAMI, FL 33136-1718

**FEI Number:** 59-1689749

**Certificate of Status Desired:** Yes

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

MCBRIDE, JOHN  
2234 N.W. 99TH STREET  
MIAMI, FL 33147 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

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title D  
Name SCOTT, WILLIE  
Address 1920 NW 115TH ST  
City-State-Zip: MIAMI FL 33167

Title PD  
Name WASHINGTON, KENNETH L  
Address 1992 N.W. 57TH STREET  
City-State-Zip: MIAMI FL 33142

Title S  
Name PLA, HELEN  
Address 17520 NW 10TH CT  
City-State-Zip: MIAMI FL 33169

Title S  
Name WILCOX, THELMA  
Address 2000 NW 119TH ST, # 923  
City-State-Zip: MIAMI FL 33167

Title T  
Name MILLER, GRADY L  
Address 1045 N.W. 129TH STREET  
City-State-Zip: NORTH MIAMI FL 33168

Title D  
Name MCBRIDE, JOHN  
Address 2234 N.W. 99TH STREET  
City-State-Zip: MIAMI FL 33147

*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:** JOHN MCBRIDE

**CHAIRMAN, BOARD OF TRUSTEES**

**02/12/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date