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: DJ JOHNSONHUBBARD

I

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# 744459

Entity Name: BETHEL A.M.E. CHURCH OF NAPLES, INC.

Current Principal Place of Business:

2935 64TH STREET SOUTHWEST NAPLES, FL 34105-7315

Current Mailing Address:

P.O. BOX 11975 NAPLES, FL 34101-2975

FEI Number: 59-1893662

Name and Address of Current Registered Agent:

JOHNSONHUBBARD, DEBRA 2335 18TH AVE NE NAPLES, FL 34120 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	GNATURE: DEBRA JOHNSONHUBBARD				
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	PASTOR	Title	PROTEM STEWARD		
Name	MCLEMORE , ALPHONSO PD.	Name	JOHNSONHUBBARD, D J		
Address	500 NW 7TH AVE	Address	2335 18TH AVE NE		
City-State-Zip:	POMPANO BEACH FL 33060	City-State-Zip:	NAPLES FL 34120		
Title	PRO TEM TRUSTEE	Title	STEWARD		
Name	HODGE, SHIRLEY STW	Name	GAVIN, REGINA		
Address	7802 FOUNDERS CIRCLE	Address	5250 HUNTER BLVD		
City-State-Zip:	NAPLES FL 34104	City-State-Zip:	NAPLES FL 34116		

Certificate of Status Desired: Yes

FILED Mar 16, 2023 Secretary of State 1941630525CC

Date

03/16/2023

PRO TEM STEWARD