

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000006170

**FILED**  
**Feb 18, 2014**  
**Secretary of State**  
**CC9880303698**

**Entity Name:** BETHEL AME CHURCH OF KEY WEST INC.

**Current Principal Place of Business:**

223 TRUMAN AVE  
KEY WEST, FL 33040

**Current Mailing Address:**

223 TRUMAN AVE  
KEY WEST, FL 33040

**FEI Number:** 65-0851720

**Certificate of Status Desired:** No

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

LANE, BERNARD REV.  
907 THOMAS STREET  
KEY WEST, FL 33040 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 CH  
Name THURSTON, ALANA MS  
Address 307 CATHERINE STREET  
City-State-Zip: KEY WEST FL 33040

Title VC  
Name THOMAS, NAOMI YMRS.  
Address 713 CHAPMAN LANE  
City-State-Zip: KEY WEST FL 33040

Title S  
Name WALLACE, MELISSA MS  
Address 709 WHITMARSH LN  
City-State-Zip: KEY WEST FL 33040

Title TRS  
Name SUAREZ, ALICIA MS.  
Address 5429 ROBYN LANE  
City-State-Zip: KEY WEST FL 33040

Title VC  
Name LYONS, RAYSHON  
Address 223 TRUMAN AVENUE  
City-State-Zip: KEY WEST FL 33040

*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:** ALANA THURSTON

**SECRETARY**

**02/18/2014**

Electronic Signature of Signing Officer/Director Detail

Date