| Entity Name: BETHEL | A.M.E. CHURCH OF | KISSIMMEE, INC. |
|---------------------|------------------|-----------------|

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

105 EAST WALNUT STREET KISSIMMEE, FL 34744

Current Mailing Address:

105 EAST WALNUT STREET KISSIMMEE, FL 34744

DOCUMENT# N0400005695

FEI Number: 05-0001005

Name and Address of Current Registered Agent:

REID III, FRANK MADISON BISHOP 101 EAST UNION STREET, SUITE 300 JACKSONVILLE, FL 32202 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 | E: FRANK MADISON REID III | | | 01/25/2023 |
|-----------------|--|-----------------|-------------------------|------------|
| | Electronic Signature of Registered Agent | | | Date |
| Officer/Dire | ctor Detail : | | | |
| Title | CEO / PASTOR | Title | VP, STEWARD PRO TEM | |
| Name | FLOYD, LATANYA WARREN | Name | RIVERS, JULY III | |
| Address | 501 VENTURE AVENUE | Address | 519 EAST WALNUT STREET | |
| City-State-Zip: | ORLANDO FL 32805 | City-State-Zip: | KISSIMMEE FL 34744 | |
| Title | CFO, TRUSTEE, STEWARD | Title | SECRETARY, STEWARD | |
| Name | HARDEE, REGINALD | Name | HARDEE, RHONDA | |
| Address | 2504 MAUI CIRCLE | Address | 2504 MAUI CIRCLE | |
| City-State-Zip: | KISSIMMEE FL 34741 | City-State-Zip: | KISSIMMEE FL 34741 | |
| Title | TRUSTEE | Title | CHAIRMAN OF TRUSTEES | |
| Name | KNOX, ALBERT | Name | SMITH, ALBERT | |
| Address | 309 BONITA ST | Address | 217 PARADISE WOODS COUR | RT |
| City-State-Zip: | KISSIMMEE FL 34744 | City-State-Zip: | DAVENPORT FL 33896 | |
| Title | STEWARD | Title | STEWARD | |

City-State-Zip: KISSIMMEE FL 34744

Name

Address

Continues on page 2

Name

Address

City-State-Zip:

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: REGINALD HARDEE

Electronic Signature of Signing Officer/Director Detail

CFO

FILED Jan 25, 2023 Secretary of State 5257006872CC

Certificate of Status Desired: Yes

HOLT-MCFADDEN, JANET E

1706 CAUSARINA LANE

WILSON, TANGALA

1800 HAGEN COURT

SAINT CLOUD FL 34771

Officer/Director Detail Continued :

| Title | STEWARD | Title | STEWARD |
|-----------------|------------------------|-----------------|---------------------------------|
| Name | WILLIAMS, TIARA | Name | ROBINS, MARGARET |
| Address | 105 EAST WALNUT STREET | Address | 105 EAST WALNUT STREET |
| City-State-Zip: | KISSIMMEE FL 34744 | City-State-Zip: | KISSIMMEE FL 34744 |
| | | | |
| | | | |
| Title | TRUSTEE | Title | TRUSTEE |
| Title Name | TRUSTEE COLE, OWEN | Title Name | TRUSTEE MATHEWS, CLIFTON JR. |
| | | | |
| Name | COLE, OWEN | Name | MATHEWS, CLIFTON JR. |