

**2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000006258

**Entity Name:** BETHANY BAPTIST CHURCH OF MALABAR INC.**Current Principal Place of Business:**1690 MARIE STREET  
MALABAR, FL 32950**Current Mailing Address:**1690 MARIE STREET  
MALABAR, FL 32950 US**FEI Number:** 47-2482307**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CIVIL, JEAN MARIE  
1690 MARIE STREET  
PALM BAY, FL 32950 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:** JEAN MARIE CIVIL

01/05/2025

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	D/P
Name	CIVIL, JEAN MARIE
Address	1606 AGNES STREET SE
City-State-Zip:	SE PALM BAY FL 32909

Title	D
Name	AUGUSTIN, SADILIA
Address	1766 MACKLIN ST
City-State-Zip:	NW PALM BAY FL 32907

Title	TRUSTEE
Name	PARFAIT, GEORGES
Address	121 NE DELMONTE ST
City-State-Zip:	PALM BAY FL 32907

Title	SECRETARY
Name	GUERRIER, HERLAN
Address	1690 MARIE STREET
City-State-Zip:	MALABAR FL 32950

Title	ADVISER / COUNSELOR
Name	MORIN , JULIA
Address	768 COTTBUS AVE NW
City-State-Zip:	PALM BAY FL 32907

Title	TREASURER
Name	PARFAIT, GEORGES
Address	121 DEL MONTE STREET NE
City-State-Zip:	PALM BAY FL 32907

Title	DEACON
Name	TERVIL, CELIUS
Address	1467 GLENCOVE AVE NW
City-State-Zip:	PALM BAY FL 32907

Title	PRESIDENT
Name	MONDESIR, JEAN RIGUERE II
Address	467 CORAL AVE SE
City-State-Zip:	PALM BAY FL 32909

*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:** GEORGES PARFAIT

TRUSTEE

01/05/2025

Electronic Signature of Signing Officer/Director Detail

Date