

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46706

Entity Name: NEW BETHEL MISSIONARY BAPTIST CHURCH
INCORPORATED OF BELLE GLADE**FILED**
Feb 12, 2013
Secretary of State
CC4278158091**Current Principal Place of Business:**1101 WEST AVENUE A
BELLE GLADE, FLORIDA
BELLE GLADE, FL 33430**Current Mailing Address:**P.O. BOX 933
BELLE GLADE, FL 33430**FEI Number: 65-0422628****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**HAIRSTON, R. F., III
1101 WEST AVE A
BELLE GLADE, FL 33430 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 T
Name EBERTE LEE WASHINGTON
Address 100 SE AVE M
City-State-Zip: BELLE GLADE FL 33430Title T
Name HENDERSON, LEONARD
Address 933 S.W. AVE B
City-State-Zip: BELLE GLADE FL 33430Title S
Name MAMIE K WILLIAMS
Address 341 SE 2ND ST
City-State-Zip: BELLE GLADE FL 33430Title S
Name ALPHONSO ROYAL
Address 1401 NW AVE F PLACE
City-State-Zip: BELLE GLADE FL 33430Title T
Name CARLTON WILLIAMS
Address ANNANDALE CIRCLE
City-State-Zip: ROYAL PALM BEACH FL 33411Title T
Name DIANE B WOODS
Address 3072 SEVILLE ST
City-State-Zip: PAHOKEE FL

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: ALPHONSO ROYAL**T****02/12/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date