2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002666

Entity Name: BETHEL ASSEMBLY OF GOD CHURCH, INC.

FILED
Mar 08, 2016
Secretary of State
CC3304494917

Current Principal Place of Business:

119 CR 315 N

INTERLACHEN, FL 32148

Current Mailing Address:

119 CR 315 N

INTERLACHEN. FL 32148 US

FEI Number: 59-2477138 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DOUGHTY, CASEY ADMAST 119 CR 315 N INTERLACHEN, FL 32148 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: CASEY DOUGHTY 03/08/2016

Electronic Signature of Registered Agent

Officer/Director Detail:

Title PD Title D

NameMCCOLLEY, MICHAEL PASTORNameFOSTER, JERRYAddress107 DOTTIE CT.Address139 MANGLES DR

City-State-Zip: INTERLACHEN FL 32148 City-State-Zip: INTERLACHEN FL 32148

Title D Title D

Name DOUGHTY, JACK Name FINLEY, SUSAN TREASURER

Address 524 SHEILA AVE Address POBOX 1565

City-State-Zip: INTERLACHEN FL 32148 City-State-Zip: HAWTHORNE FL 32640

Title D Title D

Name MEREDITH, HANK Name MULLINS, JOEY

Address POBOX 162 Address 119 NORTH COUNTY ROAD 315

122 QUEENS COUNTRY ROAD City-State-Zip: MELROSE FL 32666

City-State-Zip: INTERLACHEN FL 32148

Title D

Title D

Name NESTOR, SUE SECRETARY Name THORNROSE , ROBERT

Address POBOX 1277
Address 219 DREW ST

Address 219 DREW ST City-State-Zip: HAWTHORNE FL 32640

City-State-Zip: INTERLACHEN FL 32148

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: MICHAEL MCCOLLEY PASTOR/ DIRECTOR 03/08/2016

Electronic Signature of Signing Officer/Director Detail

Date

Date