

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000005470

**FILED**  
**Jan 10, 2015**  
**Secretary of State**  
**CC4786110745**

**Entity Name:** BETH ELOHIM MESSIANIC SYNAGOGUE, INC.

**Current Principal Place of Business:**

2009 S. MOONLIT PT.  
HOMOSASSA, FL 34448

**Current Mailing Address:**

P O BOX 203  
LECANTO, FL 34460 US

**FEI Number: 59-3479342**

**Certificate of Status Desired: No**

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

DAVIS, CONNIE J  
2009 S. MOONLIT PT.  
HOMOSASSA, FL 34448 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: CONNIE DAVIS**

**01/10/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            D  
Name            DAVIS, CONNIE J  
Address        2009 S. MOONLIT PT.  
City-State-Zip: HOMOSASSA FL 34448

Title            D  
Name            DAVIS, CONNIE J  
Address        2009 S MOONLIT PT  
City-State-Zip: HOMOSASSA FL 34448

*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: CONNIE DAVIS**

**PRESIDENT**

**01/10/2015**

Electronic Signature of Signing Officer/Director Detail

Date