2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18576

FILED Jun 25, 2006 Secretary of State

Entity Name: EL BETH EL DEVELOPMENT CENTER, INC.

Current Principal Place of Business: New Principal Place of Business: 725 WEST FOURTH ST. JACKSONVILLE, FL 32209 **Current Mailing Address: New Mailing Address:** P.O. BOX 3575 JACKSONVILLE, FL 32206 US FEI Number: 59-2845839 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GREGORY, RODNEY G P.A. 3900 ATLANTIC BLVD. JACKSONVILLE, FL 32207 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition HALL, LORENZO, SR., Name: Name: P.O. BOX 3575 N/A Address: Address: City-St-Zip: JACKSONVILLE, FL City-St-Zip: Title: () Delete Title: TSD (X) Change () Addition HALL, WRIGHT LEOLA B, . Name: Name: LORENZO HALL JR., Address: 1111 WEARE STREET Address: 7225 BUFFALO RD, APT, #1 City-St-Zip: JACKSONVILLE, FL 32206 City-St-Zip: JACKSONVILLE, FL 32208 Title: () Delete Title: (X) Change () Addition LIPSON, CAROLYN LIPSON, CAROLYN Name: Name: 224 W. 21ST STREET Address: Address: 8366 GULLEGE DR. City-St-Zip: JACKSONVILLE, FL City-St-Zip: JACKSONVILLE, FL 32209 Title: () Delete Title: () Change () Addition Name: MAXWELL, LELIA, Name: Address: 1548 E. 25 ST. Address: City-St-Zip: JACKSONVILLE, FL 32206 City-St-Zip: Title: () Delete Title: () Change () Addition HALL, ISAAC Name: Name: 9118 SIBBAID RD Address: Address: JACKSONVILLE, FL 32208 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LORENZO HALL SR. PD 06/25/2006