

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18576

Entity Name: EL BETH EL DEVELOPMENT CENTER, INC.**Current Principal Place of Business:**725 WEST 4 ST.
JACKSONVILLE, FL 32209**Current Mailing Address:**P.O. BOX 3575
JACKSONVILLE, FL 32206 US**FEI Number:** 59-2845839**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ROTHSTEIN, SETH . ESQ.
4417 BEACH BLVD
104 SUITE
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:** SETH ROTHSTEIN, ESQ.

03/26/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PD
Name	HALL, LORENZO, SR.
Address	P.O. BOX 3575 N/A
City-State-Zip:	JACKSONVILLE FL 32206

Title	TSD
Name	ISAAC HALL
Address	1111 WEARE STREET
City-State-Zip:	JACKSONVILLE FL 32206

Title	VD
Name	PAGE, CARLA L. VP
Address	3031 MONCRIEF
City-State-Zip:	JACKSONVILLE FL 32209

Title	D
Name	DENSON, IRIS
Address	1468 LANDAU ROAD
City-State-Zip:	JACKSONVILLE FL 32225

Title	SD
Name	POINSETT, RENE
Address	723 W. 4TH STREET
City-State-Zip:	JACKSONVILLE FL 32209

Title	COO
Name	PAGE, CARLA L VP
Address	3031 MONCRIEF ROAD
City-State-Zip:	JACKSONVILLE FL 32209

Title	TRUSTEE
Name	ARNOLD, DEUNTAVIOUS DECOREY TRUSTEE
Address	12435 ANARANIA DR.
City-State-Zip:	JACKSONVILLE FL 32220

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: BISHOP DR. LORENZO HALL SR.

PASTOR

03/26/2020

Electronic Signature of Signing Officer/Director Detail

Date