

**2015 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.

03/02/2015

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	LORENZO HALL JR.
Address	1111 WEARE STREET
City-State-Zip:	JACKSONVILLE FL 32206

Title	VD
Name	HALL, CAROLYN
Address	8366 GULLEGE DR.
City-State-Zip:	JACKSONVILLE FL 32208

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

Title	SD
Name	PALMER, RENE
Address	1047 COLLINSWOOD DR. W.
City-State-Zip:	JACKSONVILLE FL 32225

Title	COO
Name	CANTY, STEVE T
Address	1915 WILLES DON DR. W.
City-State-Zip:	JACKSONVILLE FL 32246

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.

PRESIDENT

03/02/2015

Electronic Signature of Signing Officer/Director Detail

Date