

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000002791

FILED
Apr 27, 2010
Secretary of State

Entity Name: BETHESDA FAMILY SERVICES FOUNDATION, INC.

Current Principal Place of Business:

88 BULL RUN CROSSING
SUITE ONE
LEWISBURG, PA 17837 US

New Principal Place of Business:

Current Mailing Address:

88 BULL RUN CROSSING
SUITE ONE
LEWISBURG, PA 17837 US

New Mailing Address:

FEI Number: 23-2816631

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CROWE, FRED REV.
19505 SW 117 COURT
MIAMI, FL 33177 US

Name and Address of New Registered Agent:

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:

Title: C
Name: REICH, ROBERT
Address: 1938 KRATZERVILLE ROAD
City-St-Zip: WINFIELD, PA 17889

Title: VC
Name: CARPENTER, JOHN
Address: 101 N. ELEVENTH ST.
City-St-Zip: SUNBURY, PA 17801

Title: T
Name: KELLY, FRED
Address: 18 FAIRWAY DRIVE
City-St-Zip: SELINGSGROVE, PA 17870 US

Title: D
Name: NAGLE, GEORGE
Address: 1500 MARKET ST. 38TH FLOOR
City-St-Zip: PHILADELPHIA, PA 19102

Title: P
Name: HERBST, DOMINIC
Address: 88 BULL RUN CROSSING, SUITE ONE
City-St-Zip: LEWISBURG, PA 17837

Title: D
Name: WETZEL, MARY
Address: 3 CRESTMONT DR.
City-St-Zip: EAGLES MERE, PA 17731

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: DOMINIC HERBST

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04/27/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date