2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2009
Secretary of State

DOCUMENT# N00000006497

Entity Name: BETHLEHEM COMMUNITY CENTER, INC.

Current Principal Place of Business:

835 SW BETHLEHEM AVE.
FORT WHITE, FL 32038

New Principal Place of Business:

Current Mailing Address:

835 SW BETHLEHEM AVE.
FORT WHITE, FL 32038

New Mailing Address:

FEI Number: 59-3656202 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NEOMIA, BROWN
1908 SW SCRUBTOWN ROAD
FORT WHITE, FL 32038 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: DC ( ) Delete
Name: NEOMIA, BROWN
Address: 1908 SW SCRUBTOWN ROAD
City-St-Zip: FORT WHITE, FL 32038

Title: D ( ) Delete
Name: FREENEY, RUDOLPH
Address: 965 S.W. BETHLEHEM AVENUE
City-St-Zip: FORT WHITE, FL 32038

Title: D ( ) Delete
Name: ANDERSON, MORRIS
Address: 1275 S.W. COUNTY ROAD 778
City-St-Zip: FORT WHITE, FL 32038

Title: D ( ) Delete
Name: EARNEST, BROWN
Address: 1397 SW SCRUBTOWN ROAD
City-St-Zip: FORT WHITE, FL 32038

Title: S ( ) Delete
Name: GRIFFIN, KIM
Address: P.O. BOX 238
City-St-Zip: FORT WHITE, FL 32038

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: NEOMIA BROWN DC 04/16/2009

Electronic Signature of Signing Officer or Director — Date