

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Apr 21, 2011
Secretary of State

DOCUMENT# N06000009886

Entity Name: NEW BETHEL LAKELAND SOCIAL SERVICES, INC.**Current Principal Place of Business:**2122 MARTIN LUTHER KING JR AVENUE
LAKELAND, FL 33805 US**New Principal Place of Business:****Current Mailing Address:**2205 MARTIN LUTHER KING JR AVENUE
LAKELAND, FL 33805 US**New Mailing Address:****FEI Number:** 20-5576358**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**RICHARD, RICHARDSON W
3075 GRASSLANDS DRIVE
LAKELAND, FL 33803 US**Name and Address of New Registered Agent:**HARVIN, JESSIE JR.
2205 MARTIN LUTHER KING JR. AVE
LAKELAND, FL 33805 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: JESSIE HARVIN, JR.

04/21/2011

Electronic Signature of Registered Agent_____
Date**OFFICERS AND DIRECTORS:**

Title: CD
Name: HARVIN, JESSIE JR.
Address: 2205 MARTIN LUTHER KING JR. AVE
City-St-Zip: LAKELAND, FL 33805

Title: VCD
Name: IVEY, ERNIE B
Address: 702 SWISS DRIVE
City-St-Zip: LAKELAND, FL 33810

Title: SD
Name: ROBERTS, SYLVIA B
Address: 1620 LAKE MIRIAM DRIVE
City-St-Zip: LAKELAND, FL 33813

Title: D
Name: BRUNSON, LEE
Address: 2720 HIGH RIDGE DRIVE
City-St-Zip: LAKELAND, FL 33812

Title: D
Name: BLAKE, WENDALL O
Address: 5514 KINGS MONT DRIVE
City-St-Zip: LAKELAND, FL 33813

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: JESSIE HARVIN, JR.

CD

04/21/2011

Electronic Signature of Signing Officer or Director_____
Date