

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011854

FILED
Apr 08, 2008
Secretary of State

Entity Name: BETH JUDAH EPHRAIM & COMPANIONS INC

Current Principal Place of Business:

11764 US HWY 301 SOUTH
BELLEVIEW, FL 34420

New Principal Place of Business:

Current Mailing Address:

PO BOX 1139
BELLEVIEW, FL 34421

New Mailing Address:

FEI Number: 26-1549589

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COMPUTERIZED ACCOUNTING & TAX SPECIALIST,
512 E SILVER SPRINGS BLVD
OCALA, FL 34470 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: DP () Delete
Name: HARMON, MARK
Address: 15 SPRING LAKE WAY
City-St-Zip: Ocala, FL 34472

Title: D () Delete
Name: ESQUIVEL, LINDA
Address: 4785 NE 7TH AVENUE
City-St-Zip: Ocala, FL 34479

Title: VD () Delete
Name: ESQUIVEL, OSCAR
Address: 4785 NE 7TH AVENUE
City-St-Zip: Ocala, FL 34479

Title: DT () Delete
Name: HARMON, ERIC
Address: 3900 SE 120TH STREET
City-St-Zip: BELLEVIEW, FL 34420

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:

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: MARK HARMON

DP

04/08/2008

Electronic Signature of Signing Officer or Director

Date