2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2009
Secretary of State

DOCUMENT# N93000000875

Entity Name: BETH-EL CHRISTIAN CENTER OF CLAIR MEL, INC.

Current Principal Place of Business:

6602 CAUSEWAY BOULEVARD
TAMPA, FL 33619

New Principal Place of Business:

Current Mailing Address:

6602 CAUSEWAY BOULEVARD
TAMPA, FL 33619

New Mailing Address:

FEI Number: 59-3172724 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TRUSS, SHELLIE
7313 OBRIEN STREET
TAMPA, FL 33616 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: PD ( ) Delete
Name: TRUSS, SHELLIE
Address: 7313 OBRIEN STREET
City-St-Zip: TAMPA, FL 33616

Title: SD ( ) Delete
Name: WALKER, VERNELL
Address: 5803 LANGSTON CT.
City-St-Zip: TAMPA, FL 33619

Title: TD ( ) Delete
Name: WALKER, JOAN
Address: 1104 DAVIS DR
City-St-Zip: TAMPA, FL 33619

Title: D (X) Delete
Name: LOMAX, DAVID
Address: 7406 SHERREN DRIVE
City-St-Zip: TAMPA, FL 33619

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: VERNELL J. WALKER SD 03/05/2009

Electronic Signature of Signing Officer or Director — Date