

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004005

FILED
May 26, 2010
Secretary of State

Entity Name: BETHEL FAMILY ENRICHMENT CENTER, INC.

Current Principal Place of Business:

17025 NW 22 AVE
MIAMI GARDENS, FL 33056

New Principal Place of Business:

Current Mailing Address:

17025 N.W. 22ND AVE.
MIAMI GARDENS, FL 33056 US

New Mailing Address:

17025 NW 22 AVE
MIAMI GARDENS, FL 33056

FEI Number: 65-0512209 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HORTON, G. DAVID DR.
17025 NW 22ND AVE
OPA LOCKA, FL 33056 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: P
Name: HORTON, G. DAVID DR.
Address: 17025 N.W. 22ND AVENUE
City-St-Zip: MIAMI, FL 33056 US

Title: D
Name: DAPHNIS, GERARD
Address: 15991 N.W. 14TH ROAD
City-St-Zip: PEMBROKE PINES, FL 33028 US

Title: C
Name: DELAINE, GREGORY
Address: 17995 S W 30TH STREET
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: MGR
Name: GLENN, PAULINE G
Address: 20867 NW 9TH COURT BLDG 16 #204
City-St-Zip: MIAMI GARDENS, FL 33169 US

Title: S
Name: DAVIS, PAULA S
Address: 852 S W 178 WAY
City-St-Zip: PEMBROKE PINES, FL 33029 US

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: G. DAVID HORTON

P

05/26/2010

Electronic Signature of Signing Officer or Director

Date