

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004565

FILED
Apr 18, 2005
Secretary of State

Entity Name: BETHEL BY THE LAKE, INC.

Current Principal Place of Business:

501 W. ORANGE AVE.
TALLAHASSEE, FL 32310

New Principal Place of Business:

Current Mailing Address:

501 W. ORANGE AVE.
TALLAHASSEE, FL 32310

New Mailing Address:

FEI Number: 59-3631025

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPENCER, GWENDOLYN J
3648 SHAMROCK WEST
TALLAHASSEE, FL 32308 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 () Delete
Name: GREEN, JOHN F
Address: 501 W. ORANGE AVE.
City-St-Zip: TALLAHASSEE, FL 32310

Title: V () Delete
Name: WEBSTER, JOSEPH L SR
Address: 4891 HIGHGROVE ROAD
City-St-Zip: TALLAHASSEE, FL 32308

Title: S () Delete
Name: HANNON, THELMA K
Address: 3228 N. SHANNON LAKES DR.
City-St-Zip: TALLAHASSEE, FL 32309

Title: T () Delete
Name: JONES, LANIER A
Address: 1741 BROOKSIDE BLVD.
City-St-Zip: TALLAHASSEE, FL 32301

Title: BOD () Delete
Name: CARR, WILMON E
Address: 1221 COLEMAN STREET
City-St-Zip: TALLAHASSEE, FL 32310

Title: DIR () Delete
Name: JONES, REMERA C
Address: 830 LIBERTY ST
City-St-Zip: TALLAHASSEE, FL 32310

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:

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOHN F. GREEN

P

04/18/2005

Electronic Signature of Signing Officer or Director

Date