

**2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N07000002743

**Entity Name:** BETHANY CENTER, INC.

**Current Principal Place of Business:**

18150 BETHANY CENTER DR  
LUTZ, FL 33558

**Current Mailing Address:**

18150 BETHANY CENTER DR  
LUTZ, FL 33558

**FEI Number:** 20-8315033

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

TK REGISTERED AGENT, INC.  
101 EAST KENNEDY BLVD  
SUITE 2700  
TAMPA, FL 33602 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:** JOSEPH A DIVITO

09/23/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR, PRESIDENT  
Name LOCEY, LOIS T.  
Address 6363 NINTH AVE NORTH  
City-State-Zip: ST PETERSBURG FL 33710

Title TREASURER.  
Name SIGNORE, PHILIP  
Address 6363 NINTH AVENUE NORTH  
City-State-Zip: ST. PETERSBURG FL 33710

Title DIRECTOR, VP  
Name MORRIS, ROBERT  
Address 6363 9TH AVENUE N  
City-State-Zip: ST PETERSBURG FL 33710

Title DIRECTOR, SECRETARY  
Name BLUM, JOHN  
Address 18150 BETHANY CENTER DR  
City-State-Zip: LUTZ FL 33558

Title EXECUTIVE DIRECTOR  
Name DANIELLE, DEBRINO  
Address 18150 BETHANY CENTER DR  
City-State-Zip: LUTZ FL 33558

*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:** PHILIP P. SIGNORE

TREASURER

09/23/2021

Electronic Signature of Signing Officer/Director Detail

Date