2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL

DOCUMENT# N19000000367

Entity Name: BETHANY LEARNING ACADEMY, INC.

Current Principal Place of Business:

6229 WINEGARD RD. ORLANDO, FL 32809

Current Mailing Address:

6229 WINEGARD RD. ORLANDO, FL 32809 US

FEI Number: 83-3119472 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GEFFRARD, ESAU 6229 WINEGARD RD. ORLANDO, FL 32809 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:

Electronic Signature of Registered Agent

Date

FILED Jun 29, 2023

Secretary of State 2496651708CC

Officer/Director Detail:

Title Title S

Name STACO, BERNARD Name SAINTIL, DANIEL 6229 WINEGARD RD. 6229 WINEGARD RD. Address Address City-State-Zip: ORLANDO FL 32809 ORLANDO FL 32809 City-State-Zip:

Title Title

Name EDMOND, RAYMOND LOLO, MARIE I Name Address 6229 WINEGARD RD. Address 6229 WINEGARD RD. City-State-Zip: ORLANDO FL 32809

City-State-Zip: ORLANDO FL 32809

Title **CFO** Title VΡ

DELIEN, ALIDE Name NOEL. JEAN LUC 6229 WINEGARD RD. Address Address 703 POLMERAT ST City-State-Zip: ORLANDO FL 32809 ORLANDO FL 32818 City-State-Zip:

Title COO

Name GEFFARD, ESAU Address 6229 WINEGARD RD. ORLANDO FL 32809 City-State-Zip:

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.

Name

06/29/2023 SIGNATURE: ALIDE DELIEN **CFO**