

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05261

FILED
Jun 04, 2009
Secretary of State

Entity Name: HAITIAN PENTECOSTAL CHURCH OF GOD, INC.

Current Principal Place of Business:

121 NE 23RD COURT
POMPANO BEACH, FL 33060

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 10193
POMPANO BEACH, FL 33060

New Mailing Address:

FEI Number: 59-2451513 **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:

Name and Address of New Registered Agent:

NICOLAS, MICHEL
121 NE 23RD COURT
POMPANO BEACH, FL 33060 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NICOLAS, MICHEL
Address: 121 NE 23RD COURT
City-St-Zip: POMPANO BEACH, FL 33060

Title: SD () Delete
Name: FRANCOIS, PHILOMENE
Address: 820 NE 43RD STREET
City-St-Zip: POMPANO BEACH, FL 33064

Title: VD () Delete
Name: EGERNE, JACOB
Address: 250 NE 23 COURT
City-St-Zip: POMPANO BEACH, FL 33060

Title: TD () Delete
Name: VALME, MARISE
Address: 2300 NE 1ST AVE
City-St-Zip: POMPANO BEACH, FL 33060

Title: D () Delete
Name: NICOLAS, JOSEPHINE
Address: 121 NE 23 COURT
City-St-Zip: POMPANO BEACH, FL 33064

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:

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: NICOLAS MICHEL

PD

06/04/2009

Electronic Signature of Signing Officer or Director

Date