

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 06, 2009
Secretary of State**

DOCUMENT# N07000001670

Entity Name: SECOND HAITIAN BAPTIST CHURCH OF FORT MYERS, INC.

Current Principal Place of Business:

2306 SUNRISE BLVD
FT MYERS, FL 33907

New Principal Place of Business:

3660 CENTRAL AVENUE
11-13
FT MYERS, FL 33901

Current Mailing Address:

2306 SUNRISE BLVD
FT MYERS, FL 33907

New Mailing Address:

3660 CENTRAL AVENUE
11-13
FT MYERS, FL 33901

FEI Number: 20-8465708 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLOMBE, LUCIEN
8754 AUSTIN ST
FT MYERS, FL 33907 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: D () Delete
Name: LACOMBE, HUBERT
Address: 2306 SUNRISE BLVD
City-St-Zip: FT MYERS, FL 33907

Title: D () Delete
Name: COLOMBE, LUCIEN
Address: 8754 AUSTIN ST
City-St-Zip: FT MYERS, FL 33907

Title: D () Delete
Name: ESTIMO, LISTA
Address: 2306 SUNRISE BLVD
City-St-Zip: FT MYERS, FL 33907

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LACOMBE, HUBERT
Address: 3660 CENTRAL AVENUE
City-St-Zip: FT MYERS, FL 33901

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

Title: D (X) Change () Addition
Name: ESTIMO, LISTA
Address: 3660 CENTRAL AVENUE
City-St-Zip: FT MYERS, FL 33901

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: HUBERT LACOMBE

D

04/06/2009

Electronic Signature of Signing Officer or Director

_____ Date