

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 26, 2003 8:00 am
Secretary of State

02-26-2003 90151 038 ****61.25

DOCUMENT # N94000000205

1. Entity Name

SECOND HAITIAN CHURCH OF THE NAZARENE, INC.



Principal Place of Business

**4960 OLD WINTER GARDEN RD
ORLANDO FL 32811
US**

Mailing Address

**4960 OLD WINTER GARDEN RD
ORLANDO FL 32811
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3216769**

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**MARCELIN, JEAN F
7027 COUPERIN BLVD
ORLANDO FL 32818**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE **DP** Delete
NAME **MARCELIN, JEAN F**
STREET ADDRESS **7027 COUPERIN BLVD**
CITY-ST-ZIP **ORLANDO FL 32818**

TITLE **SD** Delete
NAME **ROCHE, ELTA**
STREET ADDRESS **1865 TIGERWOOD ST.**
CITY-ST-ZIP **ORLANDO FL 32818**

TITLE **D** Delete
NAME **BAPTISTE, JEANNETTE JEAN**
STREET ADDRESS **2848 N PINE HILLS RD. APT 118**
CITY-ST-ZIP **ORLANDO FL 32808**

TITLE **AP** Delete
NAME **ROCHE, ROBENS**
STREET ADDRESS **1865 TIGERWOOD CT.**
CITY-ST-ZIP **ORLANDO FL 32818**

TITLE **DT** Delete
NAME **MOMPLAISIR, BONNET**
STREET ADDRESS **2625 STALEY COURT**
CITY-ST-ZIP **ORLANDO FL 32818**

TITLE **E** Delete
NAME **JOSEPH, DOMINIQUE**
STREET ADDRESS **4636 EDMOOR**
CITY-ST-ZIP **ORLANDO FL 32839**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PIERRE A. DUBASON** Change Addition
NAME **PIERRE A. DUBASON**
STREET ADDRESS **4465 Westgrove way**
CITY-ST-ZIP **Orlando Fl. 32808**

TITLE **Gimmy Petit Frier** Change Addition
NAME **Gimmy Petit Frier**
STREET ADDRESS **6437 Lauren ct**
CITY-ST-ZIP **Orlando Fl. 32818**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **PIERRE A. DUBASON** 2/23/03 (407) 822-7311

CR2E037 (10/02)