

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003590

FILED  
Apr 05, 2007  
Secretary of State

Entity Name: ASSEMBLEE CHRETIENNE, INC.

**Current Principal Place of Business:**

1014 E. YUKON STREET  
TAMPA, FL 33604 US

**New Principal Place of Business:**

**Current Mailing Address:**

1014 E. YUKON STREET  
TAMPA, FL 33604 US

**New Mailing Address:**

FEI Number: 59-3334301      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CANGE, VIOLA  
5210 E HOLLAND ST  
TAMPA, FL 33617 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: PD ( ) Delete  
Name: REVOLUS, JEAN  
Address: 1812 E BRUST AVE  
City-St-Zip: TAMPA, FL 33617

Title: SD ( ) Delete  
Name: CANGE, VIOLA  
Address: 5210 E HOLLAND ST  
City-St-Zip: TAMPA, FL 33617

Title: TD ( ) Delete  
Name: SAINT-JEAN, SONY  
Address: 4712 BARRETT CR  
City-St-Zip: TAMPA, FL 33617

Title: D ( ) Delete  
Name: EUGENE, JEAN  
Address: 11314 SUMMER CT D  
City-St-Zip: TAMPA, FL 33612

Title: MD ( ) Delete  
Name: REVOLUS, FLORENCE  
Address: 1812 E BRUST AVE  
City-St-Zip: TAMPA, FL 33612

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: REVOLUS, JEAN E MR  
Address: 1812 E BRUST AVE  
City-St-Zip: TAMPA, FL 33617

Title: SD (X) Change ( ) Addition  
Name: CANGE, VIOLA MS  
Address: 5210 E HOLLAND ST  
City-St-Zip: TAMPA, FL 33617

Title: TD (X) Change ( ) Addition  
Name: SAINT-JEAN, SONY MR  
Address: 4712 BARRETT CR  
City-St-Zip: TAMPA, FL 33617

Title: D (X) Change ( ) Addition  
Name: EUGENE, JEAN MR  
Address: 11314 SUMMER CT D  
City-St-Zip: TAMPA, FL 33612

Title: MD (X) Change ( ) Addition  
Name: REVOLUS, FLORENCE D MRS  
Address: 1812 E BRUST AVE  
City-St-Zip: TAMPA, FL 33612

I hereby certify that the information supplied with this filing does not qualify for the 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: JEAN EMMANUEL REVOLUS

PD

04/05/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date