

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2007 8:00 am
Secretary of State

05-03-2007 90087 001 ***211.25

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1. Entity Name
**FIRST HAITIAN BAPTIST CHURCH OF NORTH
LAUDERDALE, INC.**



Principal Place of Business
**1350 SOUTH STATE ROAD 7
NORTH LAUDERDALE, FL 33068**

Mailing Address
**1350 SOUTH STATE ROAD 7
NORTH LAUDERDALE, FL 33068**

DDU14100



DO NOT WRITE IN THIS SPACE

04302007 No Chg-NP CR2E037 (4/06)

4. FEI Number
65-0433035

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**PHILIPPE, WILLEM
1350 SOUTH STATE ROAD 7
NORTH LAUDERDALE, FL 33068**

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IN THIS SPACE**

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

4/28/07

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
PHILIPPI, WILLEM PASTOR
1350 SOUTH STATE ROAD 7
NORTH LAUDERDALE, FL 33068**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DV
LOSIER, BERNARD
7902 SW 9 ST
NORTH LAUDERDALE, FL 33068**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
PHILLIPPI, JESULIA
7523 KIMBERLY BLVD
NORTH LAUDERDALE, FL 33068**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
COLIN, ORELIA
1350 SR 7
NORTH LAUDERDALE, FL 33068**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/28/07