

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005014

FILED
Apr 20, 2012
Secretary of State

Entity Name: HAITIAN MISSION EVANGELICAL MELCHISSEDECK, INC.

Current Principal Place of Business:

310 SOUTHRIDGE ROAD
DELRAY, FL 33444

New Principal Place of Business:

2943 SPRING PARK RD
606
JACKSONVILLE, FL 33444

Current Mailing Address:

P O BOX 5241
JACKSONVILLE, FL 32207

New Mailing Address:

2943 SPRING PARK RD
606
JACKSONVILLE, FL 33444

FEI Number: 31-1815810

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FONTUS, APOLOS REV.
2943 SPRING PARK ROAD
606
JACKSONVILLE, FL 32207 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
Name: FONTHUS, APOLOS REV.
Address: 2943 SPRING PARK ROAD #606
City-St-Zip: JACKSONVILLE, FL 32207

Title: SD
Name: JEAN, MARIE A
Address: 317 SW 1ST STREET
City-St-Zip: DELRAY BEACH, FL 33444

Title: TD
Name: FONTHUS, MARIE K
Address: 2943 SPRING PARK ROAD 606
City-St-Zip: JACKSONVILLE, FL 32207

Title: D
Name: FONTHUS, KERLENS
Address: 2104 JERNIGAN RD #1
City-St-Zip: JACKSONVILLE, FL 32207

I hereby 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 all other like empowered.

SIGNATURE: APOLOS FONTHUS

PD

04/20/2012

Electronic Signature of Signing Officer or Director

Date