

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003199

Entity Name: GRACE EVANGELICAL SHALOM CHURCH, INC.**Current Principal Place of Business:**441 NE 3RD AVENUE
FORT LAUDERDALE, FL 33311**Current Mailing Address:**441 NE 3RD AVENUE
FORT LAUDERDALE, FL 33311 US**FEI Number:** 35-1116085**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SYLVAIN, SELIPHETE REV. DR
441 NE 3RD AVENUE
FORT LAUDERDALE, FL 33311 US*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**Officer/Director Detail :**

Title	PD
Name	SYLVAIN, SELIPHETE REV. DR
Address	441 NE 3RD AVENUE
City-State-Zip:	FORT LAUDERDALE FL 33311

Title	VPD
Name	VERDIEU, ACCIUS PASTOR
Address	1440 NW 22 STREET APT 10
City-State-Zip:	FORT-LAUDERDALE FL 33311

Title	SD
Name	ACCIUS, EMMANUEL
Address	4510 NW 36TH STREET
City-State-Zip:	LAUDERDALE LAKE, APT #402 FL 33319

Title	ASD
Name	SYLVAIN, ANTOINE
Address	4359 NW 43RD COURT
City-State-Zip:	FORT LAUDERDALE FL 33311

Title	TD
Name	SENATUS, WISLEY
Address	4082 SIERRA TERRACE
City-State-Zip:	SUNRISE FL 33351

Title	ATD
Name	DIEUTAUD, PETIT HOMME
Address	3534 NW 33RD STREET
City-State-Zip:	LAUDERDALE LAKES FL 33306

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: SYLVAIN , SELIPHETE REV. DR

CEO/PRESIDENT

04/15/2013

Electronic Signature of Signing Officer/Director Detail_____
Date