

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007657

Entity Name: FIRST HAITIAN BAPTIST CHURCH OF INWOOD, INC.

Current Principal Place of Business:

3737 AVE S NW
WINTER HAVEN, FL 33881

Current Mailing Address:

3737 AVE S, NW
WINTER HAVEN,, FL 33881 US

FEI Number: 59-3065969

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GRACIA, JOEL PASTOR
3737 AVE S NW
WINTER HAVEN, FL 33881 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: JOEL GRACIA

03/19/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PASTOR/CHAIRMAN
Name GLESIL, RAYMOND J. SR.
Address P.O.BOX 3044
City-State-Zip: WINTER HAVEN FL 33885

Title SECRETARY
Name BLANCHARD, NEVITERS
Address 3737 AVE S NW
City-State-Zip: WINTER HAVEN FL 33881

Title TREASURER
Name CHARLES, MANES
Address 3737 AVE S, NW
City-State-Zip: WINTER HAVEN, FL 33881

Title ASST-TREASURER
Name EUGENE, ANDRE P
Address 3737 AVE S, NW
City-State-Zip: WINTER HAVEN, FL 33881

Title YOUTH PRESIDENT
Name JULIEN, GALIEN
Address 3737 AVE S, NW
City-State-Zip: WINTER HAVEN, FL 33881

Title DEACON
Name JEAN, WESNER
Address 3737 AVE S, NW
City-State-Zip: WINTER HAVEN, FL 33881

Title DEACON
Name LERICHE, BERTHONY
Address 3737 AVE S, NW
City-State-Zip: WINTER HAVEN, FL 33881

Title DEACON
Name JEAN PAUL, JEAN
Address 3737 AVE S, NW
City-State-Zip: WINTER HAVEN, FL 33881

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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: RAYMOND J. GLESIL

PASTOR

03/19/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DEACONESS
Name SENATUS, JUDETTE M.
Address 3737 AVE S, NW
City-State-Zip: WINTER HAVEN, FL 33881

Title DEACONESS
Name CHARLES, LYNDIA M.
Address 3737 AVE S, NW
City-State-Zip: WINTER HAVEN, FL 33881