

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002072

Entity Name: HAITIAN ASSOCIATION OF THE NAZARENE PASTORS & CHURCHES OF THE SOUTH FLORIDA DISTRICT, INC.**FILED**
Mar 20, 2014
Secretary of State
CC7432302313**Current Principal Place of Business:**35 NE 193RD TERR
MIAMI GARDENS, FL 33169**Current Mailing Address:**12321 SW 252 TER
HOMESTEAD, FL 33032 US**FEI Number: APPLIED FOR****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**DORSAINVIL, ERNSO P
12321 SW 252 TER
HOMESTEAD, FL 33032 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: ERNSO DORSAINVIL****03/20/2014**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :Title DVC
Name PERMIS, PASCAL
Address 15248 NW MYRTLE DRIVE
City-State-Zip: INDIANTOWN FL 34956Title DT
Name AMILCAR, ANTHONY
Address 19430 NE 1ST COURT
City-State-Zip: MIAMI GARDENS FL 33179Title DS
Name JASMIN, JOEL
Address 900 NE 17THH COURT
City-State-Zip: FORT LAUDERDALE FL 33303Title D
Name CIDEL, JEAN D
Address 1285 N.W. 101 STREET
City-State-Zip: MIAMI FL 33150Title D
Name SEJOUR, JOEL
Address 2001 NW 107 STREET
City-State-Zip: MIAMI FL 33167Title PRESIDENT
Name DORSAINVIL, ERNSO PRESIDENT
Address 12321 SW 252 TER
City-State-Zip: MIAMI FL 33032

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: ERNSO DORSAINVIL**P****03/20/2014**

Electronic Signature of Signing Officer/Director Detail

Date