#### 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000002616

Entity Name: EGLISE EVANGELIQUE DE LA PISCINE DE BETHESDA, INC.

**FILED** Jan 17, 2022 **Secretary of State** 1348761133CC

### **Current Principal Place of Business:**

3239 OLD WINTER GARDEN

SUITE 12

ORLANDO, FL 32805

## **Current Mailing Address:**

8538 WHITE ROSE DRIVE ORLANDO, FL 32818

FEI Number: 80-0405070 Certificate of Status Desired: Yes

# Name and Address of Current Registered Agent:

LABRANCHE, MARC 8538 WHITE ROSE DRIVE ORLANDO, FL 32818 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:

Name

Address

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title PASTOR, PRESIDENT Title **TREASURER** 

Name LABRANCHE, MARC Name JACQUES, JACQUELIN Address 8538 WHITE ROSE DRIVE Address 5420 ARPANA DRIVE City-State-Zip: ORLANDO FL 32839 City-State-Zip: ORLANDO FL 32818

Title DEACONESS, EXECUTIVE Title **SECRETARY** 

**SECRETARY** 

STANY, SHNIDA Name

LABRANCHE, MARIE-ALICE Address 8538 WHITE ROSE DRIVE Address 8538 WHITE ROSE DRIVE City-State-Zip: ORLANDO FL 32818

City-State-Zip: ORLANDO FL 32818 Title ASST. TREASURER Name DORSAINVIL, CHEDENA

City-State-Zip: ORLANDO FL 32818

8538 WHITE ROSE DRIVE

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.

01/17/2022 SIGNATURE: MARC LABRANCHE **PASTOR**