

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000002975

**Entity Name:** PREMIERE EGLISE BAPTISTE HAITIENNE DE MARION COUNTY, INC.

**FILED**  
**Apr 14, 2019**  
**Secretary of State**  
**9243825798CC**

**Current Principal Place of Business:**

6342 SE123RD LANE  
BELLEVIEW, FL 34420

**Current Mailing Address:**

6342 SE 123RD LANE  
BELLEVIEW, FL 34420 US

**FEI Number: 14-2008456**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

GUILENE, JOSEPH  
2588 SW 152ND LN  
OCALA, FL 34473 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: GUILENE JOSEPH**

**04/14/2019**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name GUILLAUMME, BONNET  
Address 5900 SE 125 PLACE  
City-State-Zip: BELLEVIEW FL 34420

Title VP  
Name SENAT, MAX  
Address 13 HEMLOCK TERRACE PLACE  
City-State-Zip: OCALA FL 34472

Title SEC  
Name JOSEPH, GUILENE  
Address 2588 SW 152ND LN  
City-State-Zip: OCALA FL 34473

Title TREASURER  
Name LUCIEN, JEANETTE  
Address 10961 SW 38TH AVE  
City-State-Zip: OCALA FL 34476

Title TREASURER  
Name MONVILUS, JEAN  
Address 10100 SW 45TH AVE  
City-State-Zip: OCALA FL 34476

Title SECRETARY  
Name LOUIS, VASTIE  
Address 87 PINE COURSE  
City-State-Zip: OCALA FL 34472

Title ADMINISTRATOR  
Name MAXI, JONES  
Address 16462 SW 30TH TERRACE RD  
City-State-Zip: OCALA FL 34473

*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: GUILENE JOSEPH**

**SECRETARY**

**04/14/2019**

Electronic Signature of Signing Officer/Director Detail

Date