

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000002947

**FILED**  
**Apr 29, 2013**  
**Secretary of State**  
**CC0919256829**

**Entity Name:** EGLISE BAPTISTE CENTRE DE FORMATION CHRETIENNE, INC.

**Current Principal Place of Business:**

4906 MELALEUCA LANE  
LAKE WORTH, FL 33463

**Current Mailing Address:**

4906 MELALEUCA LANE  
LAKE WORTH, FL 33463

**FEI Number:** 27-0601151

**Certificate of Status Desired:** No

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

MATHIAS, PAUL  
5952 DEERFIELD PLACE  
LAKE WORTH, FL 33463 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 DP  
Name MATHIAS, PAUL  
Address 5952 DEERFIELD PLACE  
City-State-Zip: LAKE WORTH FL 33463

Title DV  
Name BRICEAU, JEAN I  
Address 2313 WEST DRIVE  
City-State-Zip: WEST PALM BEACH FL 33409

Title DS  
Name JEAN, BENITO  
Address 226 LAKE ARBOR DR  
City-State-Zip: PALM SPRINGS FL 33461

Title T  
Name PIERRE, PIERRISMA  
Address 5943 WESTFALL RD  
City-State-Zip: LAKE WORTH FL 33463

Title VT  
Name JULES, CESAIRE M  
Address 940 HIBISCUS DRIVE  
City-State-Zip: ROYAL PALM BEACH FL 33411

*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:** PAUL MATHIAS

**PRESIDENT**

**04/29/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date