

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000005517

Entity Name: NACHDE, INC.**Current Principal Place of Business:**1873 SCRUB JAY RD
APOPKA, FL 32703**Current Mailing Address:**P.O.BOX682338
ORLANDO, FL 32868 US**FEI Number:** 80-0735952**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ALEXANDRE, ANTOINE
1873 SCRUB JAY ROAD
APOPKA, FL 32703 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	P
Name	ALEXANDRE, ANTOINE
Address	1873 SCRUB JAY ROAD
City-State-Zip:	APOPKA FL 32703

Title	T
Name	NEREUS, ANTOINE
Address	2430 WINCHESTER BLVD.
City-State-Zip:	KISSIMMEE FL 34743

Title	S
Name	CHERISCAT, MARIANNE
Address	2603 PALMETTO RIDGE
City-State-Zip:	APOPKA FL 32712

Title	VP
Name	DELMA, FONTENELLE
Address	2001 MANHATTAN LANE
City-State-Zip:	CASSELBERRY FL 32707

Title	AT
Name	CHERISCAT, SYLVIO
Address	2603 PALMETTO RIDGE
City-State-Zip:	APOPKA FL 32712

Title	AS
Name	ALEXANDRE, GUYBENSON
Address	1873 SCRUB JAY ROAD
City-State-Zip:	APOPKA FL 32703

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: ANTOINE ALEXANDRE**PRESIDENT****03/19/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date