

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

DOCUMENT# N13000002487

**FILED**  
**Mar 04, 2019**  
**Secretary of State**  
**3483708143CC**

**Entity Name:** PREMIERE EGLISE DE DIEU HAITIENNE EN JESUS CHRIST DE FORT PIERCE, INC.

**Current Principal Place of Business:**

405 S 7TH ST  
FT PIERCE, FL 34950

**Current Mailing Address:**

405 S 7TH ST  
FT PIERCE, FL 34950

**FEI Number: 13-0000024**

**Certificate of Status Desired: No**

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

JOSEPH, PIERRE P  
1473 SW IFFLA AVE  
PORT ST LUCIE, FL 34953 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 PD  
Name JOSEPH, PIERRE P  
Address 1473 SW IFFLA AVE  
City-State-Zip: PORT ST LUCIE FL 34953

Title VPD  
Name NORMIL, MARJORIE  
Address 1473 SW IFFLA AVE  
City-State-Zip: PORT ST LUCIE FL 34953

Title SD  
Name AGALITE , LE FILS  
Address 1421 PARK WAY  
City-State-Zip: FT PIERCE FL 34950

Title TD  
Name SAINT-GERMAIN, FLERINE  
Address 509 S 22 ST APT B  
City-State-Zip: FT PIERCE FL 34950

Title MD  
Name E, JUNIOR  
Address 2720 NOTH 8 TH  
2720 NOTH 8 TH  
City-State-Zip: VERO BEACH FL 33986

Title D  
Name LUIOIS-CHARLES, BOZNER  
Address 2512 S 29TH ST  
City-State-Zip: FT PIERCE FL 34168

*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: JOSEPH PIERRE PAUL**

**DIRECTOR**

**03/04/2019**

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

\_\_\_\_\_  
Date