2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000003047

Entity Name: PHILADELPHIE SEVENTH-DAY ADVENTIST CHURCH INC.

FILED Jan 26, 2015 Secretary of State CC6480978903

Current Principal Place of Business:

2310 SOUTH 29 STREET FORT-PIERCE FL. AL 34981

Current Mailing Address:

PO BOX 902

FORT-PIERCE . FL. AL 34954 US

FEI Number: APPLIED FOR Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHERENFANT, LUNEL 681 SW FAIR AVE PORT ST LUCIE, FL 33953 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	PASTOR	Title	TREASURER/ELDER
Name	CHERENFANT, LUNEL	Name	SAINT-HILAIRE, WILLIEN

3434 SW SAVONA BOULEVARD Address 681 SW FAIR AVENUE Address PORT ST LUCIE FL FL 34953 PORT SAINT LUCIE FL 34953 City-State-Zip: City-State-Zip:

COMMUNITY SERVICE DIRECTOR Title Title ASST. SECRETARY/ADVENTURER

DIRECTOR

Name JOISIL, JOEL LAHENS JULES, MARCKENDYA Name Address 805 REVELS LANE

1128 HEMLOCK CIRCLE Address City-State-Zip: FORT PIERCE FL 34986

City-State-Zip: FORT-PIERCE FL 34947

> Title **SECRETARY**

Title YOUTH DIRECTOR Name DURONE, FANORD LOUINE, KETNA Name

Address 460 8TH PLACE Address 605 SW INDIAN KEY

204

City-State-Zip: VERO BEACH FL 32960 City-State-Zip: PORT ST LUCIE FL 34986

Title **HEAD DEACONESS ELDER** Title Name HENRI, PAULETTE Name DESIR, ELVE

Address 1907 GRAND CLUB BLVD Address 6228 NW KUKUI CT

FORT-PIERCE FL 34982 City-State-Zip: City-State-Zip: PORT ST LUCIE FL 34983

Continues on page 2

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.

01/26/2015 **PASTOR** SIGNATURE: LUNEL CHERENFANT

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title HEAD DEACON

Name GEFFRARD, JACQUES

Address 460 8TH PLACE

204

City-State-Zip: VERO BEACH FL 32960

Title PERSONAL MINISTRIES DIRECTOR

Name JEAN, MODNER

Address 1620 INDIANA AVENUE

City-State-Zip: FORT-PIERCE FL 34950

Title CHILDREN MINISTRY DIRECTOR

Name CHERY, YOUNA

Address 761 NW RIVERSIDE DR.

City-State-Zip: PORT ST LUCIE FL 34983

Title SABBATH SCHOOL DIRECTOR

Name BERNEUS, ACEPHIE Address 3106 JERSEY CT

City-State-Zip: FORT-PIERCE FL 34947

Title MUSIC DIRECTOR

Name LUMA, WILDA M

Address 142 NE JETTED TER

7.00.000

City-State-Zip: PORT ST LUCIE FL 34983

Title COMMUNICATION DIRECTOR

Name ETIENNE, MEETSHELL

Address 205 MADES DR.

City-State-Zip: FORT-PIERCE FL 34947

Title ELDER

Name CHARLES, WILLY

Address 2310 SOUTH 29 STREET

City-State-Zip: FORT-PIERCE FL FL 34981

Title FAMILY LIFE DIRECTOR

Name BRIANVIL, MARIE M

Address 1128 HEMLOCK CIRCLE

City-State-Zip: FORT-PIERCE FL 34947

Title HEALTH DIRECTOR
Name CELESTIN, ISLANDE
Address 333 SW TODD AVENUE
City-State-Zip: PORT ST LUCIE FL 34983

Title SAFETY/ TECHNOLOGY DIRECTOR

Name LOUINE, PASCAL

Address 605 SW INDIAN KEY DR.
City-State-Zip: PORT ST LUCIE FL 34986

Title ELDER

Name JOSEPH, JOEL

Address 331 SE HUSTED TER

City-State-Zip: PORT ST LUCIE FL 34983

Title DORCAS DIRECTOR

Name PIERRE, MARIE CARMELLE

Address 514 N 20 ST

City-State-Zip: FORT-PIERCE FL 34950

Title PATHFINDER DIRECTOR

Name ST-HILAIRE, MILCA

Address 3434 SAVONA BLVD

City-State-Zip: PORT ST LUCIE FL 34953