## **2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16000005285

Entity Name: EGLISE TABERNACLE DE LA MANNE CACHEE

**INCORPORATED** 

**Current Principal Place of Business:** 

5849 NW LEGHORN AVE PORT ST LUCIE, FL 34986

**Current Mailing Address:** 

5849 NW LEGHORN AVE PORT ST LUICE, FL 34986 US

FEI Number: 81-2835531 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SANON, JEAN R 5849 NW LEGHORN AVE PORT ST LUCIE, FL 34986 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

FILED Mar 08, 2023

**Secretary of State** 

4930053918CC

## Officer/Director Detail:

Title P Title VP

Name JEAN, SANON R Name RICHARD, ONEL

Address 5849 NW LEGHORN AVE Address 5849 NW LEGHORN AVE
City-State-Zip: PORT ST LUCIE FL 34986 City-State-Zip: PORT ST LUCIE FL 34986

Title SECRETARY Title TREASURER
Name DAQUIN, MARIE Name ARUS, SOIRILIA

Address 5849 NW LEGHORN AVE Address 5849 NW LEGHORN AVE

City-State-Zip: PORT ST LUCIE FL 34986 City-State-Zip: PORT ST LUCIE FL 34986

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: JEAN SANON R

**PRESIDENT** 

03/08/2023