

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16000007220

**Entity Name:** EGLISE EVANGELIQUE DE BEREE INC.**Current Principal Place of Business:**6312 BOYER STREET  
ORLANDO, FL 32810**Current Mailing Address:**6312 BOYER STREET  
ORLANDO, FL 32810 US**FEI Number:** 81-3552777**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**RENELIQUE MONTECHRIST  
6312 BOYER ST.  
ORLANDO, FL 32818 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:** RENELIQUE MONTECHRIS

04/12/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            LYS, OGNOL  
Address        2311 BLAKE WAY  
City-State-Zip: OCOEE FL 34761

Title            MEMB  
Name            NOVEMBRE, ANTOINISE  
Address        6550 LONG BREEZE RD  
City-State-Zip: ORLANDO FL 32818

Title            SECRETARY  
Name            RENELIQUE, DENISE  
Address        6312 BOYER STREET  
City-State-Zip: ORLANDO FL 32810

Title            TREASURER  
Name            CHARLES, SANDRA  
Address        11525 CHESTFIELD CT  
City-State-Zip: ORLANDO FL 32837

Title            MEMBER  
Name            LOUIS, JOEL  
Address        5168 LOMA VISTA CR  
                 102  
City-State-Zip: OVIEDO FL 32765

Title            PASTOR  
Name            RENELIQUE, MONTE CHRIST  
Address        6312 BOYER STREET  
City-State-Zip: ORLANDO FL 32810

*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:** RENELIQUE MONTECHRIST

PASTOR

04/12/2017

Electronic Signature of Signing Officer/Director Detail

Date