

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000005122

Entity Name: RENDEZ VOUS CHURCH, INC.

Current Principal Place of Business:

3170 AIRMANS DRIVE, DJH 2267
FORT PIERCE, FL 34946

FILED
Mar 05, 2022
Secretary of State
4131131148CC

Current Mailing Address:

3170 AIRMANS DRIVE, DJH 2267
FORT PIERCE, FL 34946 US

FEI Number: 82-5453605

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

VOLCY, JULIO
5418 52ND AVE WEST
BRADENTON, FL 34210 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: JULIOVOLCY

03/05/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SENIOR PASTOR
Name PASTOR VOLCY, JULIO
Address 5418 52ND AVE WEST
City-State-Zip: BRADENTON FL 34210

Title CAMPUS PASTOR
Name DESIR, MAX
Address 1107 33RD AVE
City-State-Zip: BRADENTON FL 34205

Title CHAIRMAN
Name VICTOR, MONDY
Address 3170 AIRMANS DRIVE, DJH 2267
City-State-Zip: FORT PIERCE FL 34946

Title SEC
Name WILSON, LARATTE
Address P.O.BOX 29
City-State-Zip: ONECO FL 34264

Title CFO
Name COICOU, MASSILLON
Address 3170 AIRMANS DRIVE, DJH 2267
City-State-Zip: FORT PIERCE FL 34946

Title VP
Name VOLCY, SUZETTE
Address 5418 52ND AVENUE WSET
City-State-Zip: BRADENTON FL 34210

Title CAMPUS PASTOR
Name PASTOR PIERRE-VAL, ERICK
Address 108 AVENUE DES TOURTERELLES
City-State-Zip: DELMAS HT

Title CAMPUS PASTOR
Name SENAT, EDISON
Address 2700 FINLEY ROAD
City-State-Zip: IRVING TX 75062

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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: PASTOR VOLCY, JULIO

SENIOR PASTOR

03/05/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title CAMPUS PASTOR
Name LAMY , JOSUE
Address 69 RUE CAZEAU
City-State-Zip: TABARRE PORT AU PRINCE HT