### 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400000205

Entity Name: SECOND HAITIAN CHURCH OF THE NAZARENE, INC.

**FILED** May 24, 2013 **Secretary of State** CC9343142039

## **Current Principal Place of Business:**

4970 OLD WINTER GARDEN RD ORLANDO, FL 32811

# **Current Mailing Address:**

P.O. BOX 585701 ORLANDO, FL 32858 US

FEI Number: 59-3216769 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

MARCELIN, JEAN F 6712 WESTLAKE BLVD. ORLANDO, FL 32810 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.

T:41 -

CECDETADY

SIGNATURE:

Title

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail :

 $\overline{}$ 

Title	DF	Title	SECRETART
Name	MARCELIN, JEAN F	Name	MONEXANT, JOCELYNE
Address	6712 WESTLAKE BLVD	Address	7720 CARRICK CT.
Citv-State-Zip:	ORLANDO FL 32810	City-State-Zip:	ORLANDO FL 32835

Title Title **TREASURER** Α

Name MARCELIN, ARLY Name DENEJOUR, MIRENE Address 6626 MYAKKA DR.. Address 6490 ROYAL TERN ST. ORLANDO FL 32839 City-State-Zip: ORLANDO FL 32810 City-State-Zip:

Title ASST. PASTOR Title Ε

Name BEAUSSEJOUR, RUDE OCCENAT. JOEL Name Address 2612 ARPANA CT. 7311 SEENAT CT. Address City-State-Zip: ORLANDO FL 32839 City-State-Zip: ORLANDO FL 32835

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: JOCELYNE MONEXANT

**SECRETARY** 

05/24/2013