

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004979

Entity Name: HAITIAN BAPTIST EMMAUS OF FT. PIERCE, INC.**Current Principal Place of Business:**1205 ORANGE AVE
FT PIERCE, FL 34954**Current Mailing Address:**P.O. BOX 124
FT. PIERCE, FL 34956 US**FEI Number:** 65-0578408**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TATTEGRAIN, RAYMOND
2804 FAIRWAY DRIVE
FT. PIERCE, FL 34982 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	D
Name	TATTEGRAIN, RAYMOND
Address	2804 FAIRWAY DR
City-State-Zip:	FORT PIERCE FL 34982

Title	DEACONESS
Name	GILLIOM, MARIE
Address	1026 ORANGE AVE
City-State-Zip:	FORT PIERCE FL 34950

Title	D
Name	CESAR, CERESTE
Address	1205 ORANGE AVE
City-State-Zip:	FT. PIERCE FL 34954

Title	PASTOR
Name	TATTEGRAIN, SOLANGE MICHEL
Address	2804 FAIRWAY DRIVE
City-State-Zip:	FORT PIERCE FL 34982

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: SOLANGE MICHEL TATTEGRAIN**PASTOR****03/26/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date