

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 771285

FILED
Apr 29, 2009
Secretary of State

Entity Name: THE HAITIAN EVANGELICAL BAPTIST CHURCH OF POMPANO BEACH, FLORIDA, INC.

Current Principal Place of Business:

153 NW 12 STREET
POMPANO BCH, FL 33060 US

New Principal Place of Business:

Current Mailing Address:

153 NW 12 STREET
POMPANO BCH, FL 33060 US

New Mailing Address:

FEI Number: 59-2459290

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DELINOIS, REV. PIERRE Y.
5892 NW 48TH LANE
COCONUT CREEK, FL 33073 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DELINOIS, PIERRE Y.
Address: 5892 NW 48TH LANE
City-St-Zip: COCONUT CREEK, FL 33073

Title: D () Delete
Name: SAINT LOUIS, ANTOINE
Address: 2722 NE 2ND AVE
City-St-Zip: POMPANO BEACH, FL 33064

Title: T () Delete
Name: DEMELVAR, RONI
Address: 250 W SAMPLE RD, APT D-221
City-St-Zip: POMPANO BEACH, FL 33064

Title: V () Delete
Name: DELINOIS, MARILYN
Address: 5892 NW 48TH LANE
City-St-Zip: COCONUT CREEK, FL 33073

Title: S () Delete
Name: DELINOIS, TANIA
Address: 5892 NW 48TH LANE
City-St-Zip: COCONUT CREEK, FL 33073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: DEMELVAR, RONI
Address: 3924 NW 35TH TERR.
City-St-Zip: LAUDERDALE LAKES, FL 33309

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DELINOIS PIERRE Y.

PRES

04/29/2009

Electronic Signature of Signing Officer or Director

Date