2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 27, 2002 8:00 AM
Secretary of State

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Entity Name: EGLISE DE DIEU DE LA NOUVELLE ALLIANCE, INC.

Current Principal Place of Business:

4912 NORTH NEBRASKA AVE.
TAMPA, FL 33603

New Principal Place of Business:

Current Mailing Address:

6110 SOARING AVE
TEMPLE TERRACE, FL 33617

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VALMOND, JEAN M
4912 NORTH NEBRASKA AVE.
TAMPA, FL 33603 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:	PD	( ) Delete
Name:	VALMOND, JEAN M	
Address:	4912 NORTH NEBRASKA AVE.	
City-St-Zip:	TAMPA, FL 33603	
Title:	DV	( ) Delete
Name:	VALMOND, HEBERT	
Address:	6110 SOARING AVE.	
City-St-Zip:	TAMPA, FL 33617	
Title:	TD	( ) Delete
Name:	VALMOND, ELIZABETH O	
Address:	6110 SOARING AVE.	
City-St-Zip:	TAMPA, FL 33617	
Title:	SD	( ) Delete
Name:	VALMOND, DAPHNEY	
Address:	6110 SOARING AVE.	
City-St-Zip:	TAMPA, FL 33617	
Title:	SD	( ) Delete
Name:	VALMOND, FARAH D	
Address:	6110 SOARING AVE	
City-St-Zip:	TEMPLE TERRACE, FL 33617	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 for the exemption stated in Section 119.07(3)(i), 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: DAPHNE VALMOND SD 04/27/2002

Electronic Signature of Signing Officer or Director — Date