

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005094

FILED  
Apr 27, 2012  
Secretary of State

**Entity Name:** HAITIAN CHURCH OF GOD AND DELIVERANCE, INC.

**Current Principal Place of Business:**

7297 N.W. 2ND AVENUE  
MIAMI, FL 33150 US

**New Principal Place of Business:**

**Current Mailing Address:**

150 N.E. 79 TH STREET  
APT. 1101  
MIAMI, FL 33138 US

**New Mailing Address:**

7620 NW 2ND AVENUE  
APT. 7  
MIAMI, FL 33150 US

**FEI Number:** 65-0964982

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SEVERE, REV. JULES  
7297 N.W. 2ND AVENUE  
MIAMI, FL 33150 US

**Name and Address of New Registered Agent:**

SEVERE, PASTOR, REV. JULES  
7620 NW 2ND AVENUE  
APT. 7  
MIAMI, FL 33150 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: REV. JULES SEVERE, PASTOR

04/27/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CEOP  
Name: SEVERE, PASTOR, REV. JULES  
Address: 150 N.E. 79 TH STREET APT 1101  
City-St-Zip: MIAMI, FL 33138 US

Title: BMS  
Name: DERLINE, ETIENNE  
Address: 410 NE 141 STREET  
City-St-Zip: NO. MIAMI BEACH, FL 33167 US

Title: BMVP  
Name: ARISTILDE, LORIENT  
Address: 7297 NW 2ND AVE  
City-St-Zip: MIAMI, FL 33150 US

Title: BVP  
Name: SEVERE, EVANGL, LAHENS-FRITZNE  
Address: 117 NE 87 STREET  
City-St-Zip: MIAMI, FL 33138 US

Title: BM  
Name: CHARLES, EVANGL, BENITO  
Address: 503 NE 65 STREET  
City-St-Zip: MIAMI, FL 33138 US

Title: BMS  
Name: CELESTIN, WALKER  
Address: 19601 NE 1ST AVENUE  
City-St-Zip: MIAMI GARDENS, FL 33179 US

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: REV. JULES SEVERE, PASTOR

PRES

04/27/2012

Electronic Signature of Signing Officer or Director

Date