

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008437

FILED
Apr 30, 2006
Secretary of State

Entity Name: FIRST HAITIAN ALLIANCE CHURCH OF JACKSONVILLE, INC.

Current Principal Place of Business:

534 DEW DROP STREET
JACKSONVILLE, FL 32202 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 440336
JACKSONVILLE, FL 32222 US

New Mailing Address:

FEI Number: 41-2110360

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EIBON, ESPERANDIEU
2045 MONCRIEF ROAD
JACKSONVILLE, FL 32209 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: PAST () Delete
Name: ELBON, ESPERANDIEU
Address: 2045 MOCRIEF ROAD
City-St-Zip: JACKSONVILLE, FL 32209

Title: T () Delete
Name: FLORESTAL, ALOURDES
Address: 1745 WELLS ROAD # 1401
City-St-Zip: ORANGE PARK, FL 32073

Title: T () Delete
Name: FRANCK, JEAN ROBERT
Address: 534 CODY CT
City-St-Zip: ORANGE PARK, FL 32073

Title: T () Delete
Name: MATHURIN, JACQUELINE
Address: 534 CODY COURT
City-St-Zip: ORANGE PARK, FL 32073

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: ESPERANDIEU ELBON

PAST

04/30/2006

Electronic Signature of Signing Officer or Director

Date