2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006573

FILED Jul 21, 2005 Secretary of State

Entity Name: LEGLISE DE DIEU BON BERGER INC.

Current Principal Place of Business:		New Principal Place of Business:	
128 LEE BI LEHIGH AG	LVD CRES, FL 33936		
Current M	ailing Address:	New Maili	ng Address:
128 LEE BI LEHIGH AG	LVD CRES, FL 33936		
	65-1091178 FEI Number Applied For() FEI No ce with s. 607.193(2)(b), F.S., the corporation did not receive	umber Not App the prior notic	
Name and	Address of Current Registered Agent:	Name and	Address of New Registered Agent:
	EARL R IERY RD STE. D CRES, FL 33971 US		
	named entity submits this statement for the purpose	of changing	ts registered office or registered agent, or both,
	named entity submits this statement for the purpose of Florida.	of changing	ts registered office or registered agent, or both,
n the State	e of Florida. ´	of changing	
n the State	e of Florida.	of changing	ts registered office or registered agent, or both, Date
n the State SIGNATUF	e of Florida. ´		
n the State SIGNATUF DFFICERS Fitle: Name: Address:	e of Florida. RE: Electronic Signature of Registered Agent		Date
n the State SIGNATUF	e of Florida. RE: Electronic Signature of Registered Agent S AND DIRECTORS: D () Delete JULES, LIONEL 218 CONNECTICUT RD	ADDITION Title: Name: Address:	Date IS/CHANGES TO OFFICERS AND DIRECTORS
n the State BIGNATUF DFFICERS Title: Name: Address: City-St-Zip: Title: Name: Address:	e of Florida. RE: Electronic Signature of Registered Agent S AND DIRECTORS: D () Delete JULES, LIONEL 218 CONNECTICUT RD LEHIGH ACRES, FL 33936 SD () Delete GAUVIN, MARIE P 2833 SURFSIE BLVD	ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address:	Date IS/CHANGES TO OFFICERS AND DIRECTORS () Change () Addition SD (X) Change () Addition JEAN, VIERGE 216 LAUZANNE ST

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: LIONEL JULES D 07/21/2005