## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000006573

FILED Apr 23, 2007 Secretary of State

Entity Name: LEGLISE DE DIEU BON BERGER INC.

Current Principal Place of Business:				New Principal Place of Business:			
LEHIGH ACRES, FL 33936  Current Mailing Address:				New Mailing Address:			
128 LEE BL LEHIGH AC	LVD CRES, FL 339	936					
FEI Number:	65-1091178	FEI Number Applied For ( )	FEI Numb	er Not Appli	cable ( )	Certificate of S	tatus Desired ( )
Name and	Address of (	Current Registered Agent:	N	Name and	Address of N	ew Registere	ed Agent:
	ONEL ECTICUT RD ORES, FL 339						
	named entity of Florida.	submits this statement for the p	urpose of o	changing it	s registered of	ffice or registe	red agent, or both,
SIGNATUR	RE:						
Electronic Signature of Registered Agent						Date	_
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	JULES, LIONE 218 CONNECT		N A	itle: lame: \ddress: City-St-Zip:	()	Change ( ) Addi	tion
Title: Name: Address: City-St-Zip:	SD ( JOSEPH, SHEI 2079 BELL CIF IMMOKALEE, F	RCLE	N A	itle: lame: address: City-St-Zip:	()	Change ( ) Addi	tion
Title: Name: Address: City-St-Zip:	TD ( JULES, ISMEN 218 CONNECT LEHIGH ACRE	ICUT RD	۸ A	itle: lame: ddress: city-St-Zip:	()	Change ( ) Addi	tion
Title: Name: Address: City-St-Zip:	D ( CAYO, BEATRI 3103 FIRST ST LEHIGH ACRE	ΓSW	N A	itle: lame: address: City-St-Zip:	()	Change ( ) Addi	tion
Title: Name: Address: City-St-Zip:	(	) Delete	N A	itle: Jame: kddress: City-St-Zip:	VP () ROMULUS, JEA 503 OAK HAVEI IMMOKALEE, F	N	ition

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: LIONEL JULES D 04/23/2007