## 2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## Apr 26, 2006 8:00 am Secretary of State DOCUMENT # N01000008457 04-26-2006 90210 048 \*\*\*\*61.25 EGLISE BETHEL HAITIENNE DE BRANDON INC. Principal Place of Business Mailing Address 40004161 1216 WINDSOR CIR 1216 WINDSOR CIR BRANDON, FL 33510 BRANDON, FL 33510 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04192006 Chg-NP CR2E037 (11/05) City & State City & State Applied For 4. FEI Number NOT APPLICABLE Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name NICOPHENE, JEAN P 1216 WINDSOR CIR Street Address (P.O. Box Number is Not Acceptable) BRANDON, FL 33510 City Zip Code 8. 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. Larn familiar with, and accept the obligations of registered agent. SIGNATURE Signature ispects, printed partially by the estage stand the ladge cade CREATING AN Extragent signature legal of when it hatal ago 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Florida Department of State Due by May 1, 2006 Trust Fund Contribution. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Delete TITLE **¥** Addition NAME NICOPHENE, JEAN P NAME 1216 Windson Cu 1216 WINDSOR CIR STREET ADDRESS STREET ADORESS CITY ST ZIP BRANDON, FL 33510 CITY ST ZIP BILE ☐ Delete TITLE **✓** Addition Esther Niupho NICOPHENE, ESTHER NAME LAME 1216 Windshai STREET ADDRESS 1216 WINDSOR CIR STREET ADORESS CITY ST ZIP BRANDON, FL 33510 CITY ST ZIP TITLE ☐ Defete TITLE ☐ Change **√** Addition MATHE, HUGHES **NAME LAME** 3512 PLAINVIEW DR. STREET ADDRESS STREET ADDRESS CITY ST ZIP BRANDON, FL 33511 CITY ST ZIP · 🗱 Delete ☐ Change TITLE TITLE ■ Addition SEXIL. LOIUSSAINT LAME NAME STREET ADDRESS 1017 TIBURUN DR STREET ADDRESS SEFFNER, FL 33584 CITY ST ZIP CITY ST ZIP TULLE ☐ Defete TITLE ☐ Change Addition A RAYMOND, LUIS R LAME NAME STREET ADDRESS 1726 MOSAIC FOREST DR STREET ADDRESS CITY ST ZIP SEFFNER, FL 33584 CITY ST ZIP ☐ Delete TITLE TITLE Addition VILCEUS, MOLINE NAME NAME STREET ADDRESS 907 LAKEMOUNT HILLS BLVD STREET ADDRESS CITY ST ZIP BRANDON, FL 33510 CITY ST ZIP

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FILED