

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008457

FILED
Apr 12, 2009
Secretary of State

Entity Name: EGLISE BETHEL HAITIENNE DE BRANDON INC.

Current Principal Place of Business:

1216 WINDSOR CIR
BRANDON, FL 33510

New Principal Place of Business:

Current Mailing Address:

1216 WINDSOR CIR
BRANDON, FL 33510

New Mailing Address:

FEI Number: 59-3758436

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NICOPHENE, JEAN P
1216 WINDSOR CIR
BRANDON, FL 33510 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: DP () Delete
Name: NICOPHENE, JEAN P
Address: 1216 WINDSOR CIR
City-St-Zip: BRANDON, FL 33510

Title: S () Delete
Name: NICOPHENE, ESTHER
Address: 1216 WINDSOR CIR
City-St-Zip: BRANDON, FL 33510

Title: T () Delete
Name: MATHE, HUGHES
Address: 3512 PLAINVIEW DR.
City-St-Zip: BRANDON, FL 33511

Title: S (X) Delete
Name: MATHE, HUGHES
Address: 3512 PLAINVIEW DR
City-St-Zip: BRANDON, FL 33511

Title: D (X) Delete
Name: VILCEUS, MOLINE
Address: 907 LAKEMOUNT HILLS BLVD
City-St-Zip: BRANDON, FL 33510

Title: D () Delete
Name: RAYMOND, LOUIS R
Address: 1726 MOSAIC FOREST DR
City-St-Zip: SEFFNER, FL 33584

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
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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 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: JEAN P. NICOPHENE

DP

04/12/2009

Electronic Signature of Signing Officer or Director

Date