

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2006 8:00 am
Secretary of State

03-28-2006 90111 026 ****61.25

DOCUMENT # N02000000785

1. Entity Name
BETHESDA HAITIAN BAPTIST CHURCH, INC.



Principal Place of Business
**4371 34TH ST
ST PETERSBURG, FL 33711**

Mailing Address
**P O BOX 5931
ST PETERSBURG, FL 33733**

40043240



2. Principal Place of Business

5995 DR ML KING JR ST

Suite, Apt. #, etc.

SP.

3. Mailing Address

P.O. Box 15931

Suite, Apt. #, etc.

03222006 Chg-NP CR2E037 (11/05)

City & State

St Petersburg

Zip

33705

Country

U.S.A

City & State

St Petersburg

Zip

33733

Country

U.S.A

4. FEI Number
06-1650641

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**PAUL, REGINAL
642 37TH AVE S
ST PETERSBURG, FL 33705**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete

**C
NAME
PAUL, REGINAL CHRM
STREET ADDRESS
642 37TH AVE S
CITY-ST-ZIP
ST PETERSBURG, FL 33733**

TITLE ☐ Delete

**C
NAME
PAUL, MIREILLE CONSELO
STREET ADDRESS
642 37TH AVE S
CITY-ST-ZIP
ST PETERSBURG, FL 33733**

TITLE ☐ Delete

**P
NAME
ALEXIS, DIANA
STREET ADDRESS
2075 N HIGHBROL AVE
CITY-ST-ZIP
CLEARWATER, FL 33755**

TITLE ☐ Delete

**NAME
STREET ADDRESS
CITY-ST-ZIP**

TITLE ☐ Delete

**NAME
STREET ADDRESS
CITY-ST-ZIP**

TITLE ☐ Delete

**NAME
STREET ADDRESS
CITY-ST-ZIP**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition

**NAME
STREET ADDRESS
CITY-ST-ZIP**

TITLE ☐ Change ☐ Addition

**NAME
STREET ADDRESS
CITY-ST-ZIP**

TITLE ☐ Change ☐ Addition

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CITY-ST-ZIP**

TITLE ☐ Change ☐ Addition

**NAME
STREET ADDRESS
CITY-ST-ZIP**

12. I hereby certify that the information supplied with this filing 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

Reginal Paul

REGINAL PAUL

3-23-06, 727-564-6031

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #