

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001273

FILED  
Mar 15, 2005  
Secretary of State

**Entity Name:** FIRST HATIAN FREE METHODIST CHURCH OF ORLANDO, INC.

**Current Principal Place of Business:**

400 N. PINEHILL RD.  
D  
ORLANDO, FL 32811

**New Principal Place of Business:**

**Current Mailing Address:**

7201 WOODRIDGE PARK DR, #10-207  
ORLANDO, FL 32818

**New Mailing Address:**

**FEI Number:** 59-3724024

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

ST. PIERRE, ANTHONY  
7201 WOODRIDGE PARK DR, #10-207  
ORLANDO, FL 32818 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: PST ( ) Delete  
Name: ST PIERRE, ANTHONY  
Address: 7201 WOODRIDGE PARK DR, #10-207  
City-St-Zip: ORLANDO, FL 32818

Title: T ( ) Delete  
Name: MONIQUE, MICHEL T  
Address: 5584 ARNOLD PALMER DR. #116  
City-St-Zip: ORLANDO, FL 32811

Title: S ( ) Delete  
Name: DIEUSILUS, LOUIS T  
Address: 5405 POINT VISTA #208  
City-St-Zip: ORLANDO, FL 32839

Title: D ( ) Delete  
Name: FLOR ANGEL, MICHEL  
Address: 5584 ARNOLD PALMER DR #116  
City-St-Zip: ORLANDO, FL 32811

Title: D ( ) Delete  
Name: MERCEDES, CENESCAR  
Address: 4513 SAN SEBASTIAN CIR  
City-St-Zip: ORLANDO, FL 32818

Title: T ( ) Delete  
Name: NERLANDE, OREUS  
Address: 4513 SAN SEBASTIAN CIR  
City-St-Zip: ORLANDO, FL 32818

**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  
Name:  
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 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: SAINT PIERRE ANTONY

PST

03/15/2005

Electronic Signature of Signing Officer or Director

Date