

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002398

FILED  
Mar 08, 2006  
Secretary of State

Entity Name: EGLISE BAPTISTE UNIE, INC.

## Current Principal Place of Business:

595 NW 18TH STREET  
FORT LAUDERDALE, FL 33311

## New Principal Place of Business:

## Current Mailing Address:

595 NW 18TH STREET  
FORT LAUDERDALE, FL 33311

## New Mailing Address:

FEI Number: 04-3686043

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

EDMOND, LEDOINE  
595 NW 18TH STREET  
FORT LAUDERDALE, FL 33311 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: VP ( ) Delete  
Name: NORT, JOSEPH  
Address: 3301 NW 47TH TERRACE  
City-St-Zip: FORT LAUDERDALE, FL 33319

Title: VD ( ) Delete  
Name: JILME, ANDRAL  
Address: 834 SW 13TH ST #1  
City-St-Zip: DAVIE, FL 33312

Title: STD ( ) Delete  
Name: REMY, NADINE  
Address: 921 SW 15TH TERRACE  
City-St-Zip: DAVIE, FL 33312

Title: P ( ) Delete  
Name: EDMOND, LEDOINE  
Address: 595 NW 18TH STREET  
City-St-Zip: FORT LAUDERDALE, FL 33311

## 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:

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: EDMOND LEDOINE

P

03/08/2006

Electronic Signature of Signing Officer or Director

Date