

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 24, 2003 8:00 am
Secretary of State

06-02-2003 90200 005 ****75.00

DOCUMENT # N02000003391

1. Entity Name

GOOD SAMARITAN OUTREACH CENTER, INC.



Principal Place of Business

Mailing Address

420 SW 62 AVE
MARGATE FL 33068

420 SW 62 AVE
MARGATE FL 33068

55049757

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

04-3658442

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DUCTAN, ZENAS SENIOR PASTEUR
420 SW 62 AVE
MARGATE FL

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 true if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete
NAME **ZENAS, DUCTAN SENIOR PASTEUR**
STREET ADDRESS **420 SW 62 AVE**
CITY-ST-ZIP **MARGATE FL 33068**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VSC** ☐ Delete
NAME **JOSEPH, LUDERS**
STREET ADDRESS **420 SW 62 AVE**
CITY-ST-ZIP **MARGATE FL 33068**

TITLE **D** ☐ Change ☐ Addition
NAME **PASTEUR ASSISTANT**
STREET ADDRESS **CONSTANCE DORLEANS**
CITY-ST-ZIP **3540 WASHINGTON ST # 211 HOLLYWOOD FL 33021**

TITLE **D CL** ☐ Delete
NAME **DUCTAN, ETHA**
STREET ADDRESS **420 SW 62 AVE**
CITY-ST-ZIP **MARGATE FL 33068**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **CL** ☐ Delete
NAME **DANTES, JOEL**
STREET ADDRESS **1441 NW 19TH ST #131**
CITY-ST-ZIP **MIAMI FL 33125**

TITLE **D** ☐ Change ☐ Addition
NAME **PASTEUR ADMINISTRATOR**
STREET ADDRESS **YVES CARRENAUD**
CITY-ST-ZIP **7517 S.W. 6 ST N. LAUDERDALE FL 33068**

TITLE **CL** ☐ Delete
NAME **NORDELUS, ELIANA**
STREET ADDRESS **420 SW 62 AVE**
CITY-ST-ZIP **MARGATE FL 33068**

TITLE ☐ Change ☐ Addition
NAME **FRANCE EFRANCE LORDEUS**
STREET ADDRESS **7437 S.W. 12 ST**
CITY-ST-ZIP **N LAUDERDALE FL 33068**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **CL** ☐ Change ☐ Addition
NAME **NUSETTE Belizaire**
STREET ADDRESS **420 S.W. 62 AVE**
CITY-ST-ZIP **MARGATE FL 33068**

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

ZIGUAN/PASREQUEDUCEDTAN

MAY 03

(954) 822-3512

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)

attachment 55049757

#NO 2000003391

Zenas Ductan
420 SW 62nd Avenue
Margate, FL 33068

May 30, 2003

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

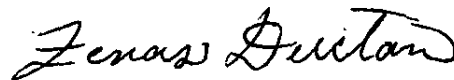
RE: Request to Change the Name of the Organization
EIN#: 04-3658442

To Whom It May Concern:

As of June 1, 2003, I, Zenas Ductan, request a change of Name for the organization, Good Samaritan Outreach Center, Inc to "Eglise Baptiste Haitienne du Pelerin", which mean Pigrims Haitian Baptist Church.

Should you have any questions, please contact me at 954-974-5694 or mobile 954-822-3512.

Sincerely,



Zenas Ductan
Senior Pastor