

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2008 8:00 am
Secretary of State

04-17-2008 90044 007 ****61.25

DOCUMENT # N02000004102

1. Entity Name
CHURCH OF GOD OF PROPHECY UNION, CORP.



Principal Place of Business
289 NW 108TH TERR.
MIAMI, FL 33168

Mailing Address
1225 NW 103 LANE
APT 206
MIAMI, FL 33147



2. Principal Place of Business - No P.O. Box # 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04082008 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
01-0734269

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JOSEPH, LOUISCENE
1225 NW 103 LANE
APT 206
MIAMI, FL 33147

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, 2008**

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 P
NAME LOUISCENE, JOSEPH ☐ Delete
STREET ADDRESS 1225 NW 103 LANE APT 206
CITY-ST-ZIP MIAMI, FL 33147

TITLE President-Pastor ☒ Change ☐ Addition
NAME LOUISCENE, JOSEPH
STREET ADDRESS 1225 NW 103 Lane Apt 206
CITY-ST-ZIP Miami, FL 33147

TITLE V ☒ Delete
NAME NORDELUS, CONSTANT
STREET ADDRESS 1373 NE 150 ST
CITY-ST-ZIP MIAMI, FL 33161

TITLE Pastor Assistant ☒ Change ☐ Addition
NAME Daniel Destin
STREET ADDRESS 247 NE 118th St
CITY-ST-ZIP Miami FL 33161

TITLE T ☒ Delete
NAME EGLOUS, NAPOLEON
STREET ADDRESS 45 NW 60 TERR
CITY-ST-ZIP MIAMI, FL 33127

TITLE Treasurer ☒ Change ☐ Addition
NAME Amasette Francois
STREET ADDRESS 8050 NW Miami Court 235
CITY-ST-ZIP Miami, FL 33150

TITLE S ☐ Delete
NAME MICHEL, ELDA
STREET ADDRESS 10008 NW LITTLE RIVER DR
CITY-ST-ZIP MIAMI, FL 33147

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
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: *Louiseene Joseph*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/08/08 (305) 691-3383

Date

Daytime Phone #