

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004270

FILED  
Apr 21, 2008  
Secretary of State

Entity Name: EGLISE EVANGELIQUE HAITIENNE DE JACKSONVILLE, INC.

**Current Principal Place of Business:**

2559 ERNEST STREET  
JACKSONVILLE, FL 32204

**New Principal Place of Business:**

**Current Mailing Address:**

2559 ERNEST STREET  
JACKSONVILLE, FL 32204

**New Mailing Address:**

FEI Number: 86-1067406

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PETIT-HOME, VASTEY  
2559 ERNEST STREET  
JACKSONVILLE, FL 32204 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: P ( ) Delete  
Name: PETIT- HOMME, VASTEY  
Address: 2559 ERNEST STREET  
City-St-Zip: JACKSONVILLE, FL 32204

Title: T ( ) Delete  
Name: PETIT- HOMME, IFELIE  
Address: 2559 ERNEST STREET  
City-St-Zip: JACKSONVILLE, FL 32204

Title: VPF ( ) Delete  
Name: PETIT-HOMME, THELICIEN  
Address: 3113 ROGERO RD  
City-St-Zip: JACKSONVILLE, FL 32211

Title: V ( ) Delete  
Name: PETIT-HOMME, VITHE  
Address: 1706 ART MUSEUM DRIVE  
City-St-Zip: JACKSONVILLE, FL 32209

Title: PF ( ) Delete  
Name: KENSON, ILLDERIC  
Address: 5537 MAINFIELD PLACE  
City-St-Zip: JACKSONVILLE, FL 32205

**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:

I hereby certify that the information supplied with this filing does not qualify 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: VASTEY PETIT-HOMME

P

04/21/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date