

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005047

FILED
Jan 10, 2005
Secretary of State

Entity Name: HAITIAN PENTECOSTAL CHURCH INC.

Current Principal Place of Business:

5500 HAVERFORD WAY
LAKE WORTH, FL 33463

New Principal Place of Business:

Current Mailing Address:

5500 HAVERFORD WAY
LAKE WORTH, FL 33463

New Mailing Address:

FEI Number: 06-1639076

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESTICA, ROGES
5500 HAVERFORD WAY
LAKE WORTH, FL 33463 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: PD () Delete
Name: ESTICA, ROGES
Address: 5500 HAVERFORD WAY
City-St-Zip: LAKE WORTH, FL 33463

Title: TD () Delete
Name: EDOUARD, PROSPER
Address: 226 S.W. 4TH AVE.
City-St-Zip: BOYNTON BEACH, FL 33435

Title: V () Delete
Name: ESTICA, GRACIEUSE
Address: 550 HAVERFORD WAY
City-St-Zip: LAKE WORTH, FL 33463

Title: D () Delete
Name: PACIUS, JOSEPH J
Address: 6255 SPINDRIFT CT.
City-St-Zip: LAKE WORTH, FL 33463

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 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: ROGES ESTICA

P

01/10/2005

Electronic Signature of Signing Officer or Director

Date