

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007809

FILED
Apr 26, 2005
Secretary of State

Entity Name: EGLISE BETHEL VALLEE DE BENEDICTION, INC.

Current Principal Place of Business:

6900 SILVER STAR RD
STE 206-A
ORLANDO, FL 32818

New Principal Place of Business:

1400 NOWELL ST
ORLANDO, FL 3208

Current Mailing Address:

PO. BOX 680696
ORLANDO, FL 32868

New Mailing Address:

FEI Number: 65-1004469

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOYER, JULIEN J
409 REGAL DOWNS CIRCLE
WINTER GARDEN, FL 34787 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: BOYER, CARIDAD
Address: 409 REGAL DOWNS CIRCLE
City-St-Zip: WINTER GARDEN, FL 34787

Title: S () Delete
Name: WABSENE ANOIR, SAINT SAUVEUR
Address: 6200 RALEIGH ST APT 409
City-St-Zip: ORLANDO, FL 32835

Title: TR () Delete
Name: LINDOR, PIERRE
Address: 409 REGAL DOWNS
City-St-Zip: WINTER GARDEN, FL 34787

Title: S () Delete
Name: SEVERE, MAGALIE
Address: POBOX 550365
City-St-Zip: ORLANDO, FL 32855

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: MARIE, CHACHA M
Address: 409 REGAL DOWNS CIR
City-St-Zip: WINTER GARDEN, FL 34787

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: ROSEMAY, RAYMOND
Address: POBOX 680696
City-St-Zip: ORLANDO, FL 32868

Title: P () Change (X) Addition
Name: BOYER, JULIEN J
Address: 409 REGAL DOWNS CIR
City-St-Zip: WINTER GARDEN, FL 34787

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: JULIENN JM BOYER

PRES

04/26/2005

Electronic Signature of Signing Officer or Director

Date