2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007809

FILED Apr 29, 2006 Secretary of State

Entity Name: EGLISE BETHEL VALLEE DE BENEDICTION, INC.

Current Principal Place of Business: New Principal Place of Business:

1400 NOWELL ST ORLANDO, FL 3208

Current Mailing Address: New Mailing Address:

PO. BOX 680696 ORLANDO, FL 32868

FEI Number: 65-1004469 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BOYER, JULIEN J
409 REGAL DOWNS CIRCLE
WINTER GARDEN, FL 34787 US
BOYER, JULIEN J
1969 ANCIENT OAK DR
OCOEE, FL 34761 US

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: 04/29/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP () Delete Title: VP (X) Change () Addition Name: BOYER, CARIDAD Name: BOYER, CARIDAD

Address: 409 REGAL DOWNS CIRCLE Address: 1969 ANCIENT OAK DR
City-St-Zip: WINTER GARDEN, FL 34787 City-St-Zip: OCOEE, FL 34761

 Title:
 S
 () Delete
 Title:
 S
 (X) Change () Addition

 Name:
 MARIE, CHACHA M
 Name:
 MARIE, CHACHA M

Address: 409 REGAL DOWNS CIR Address: 1969 ANCIENT OAK DR
City-St-Zip: WINTER GARDEN, FL 34787 City-St-Zip: OCOEE, FL 34761

Title: TR () Delete Title: TR (X) Change () Addition

 Name:
 LINDOR, PIERRE
 Name:
 LINDOR, PIERRE

 Address:
 409 REGAL DOWNS
 Address:
 1969 ANCIENT OAK DR

 City-St-Zip:
 WINTER GARDEN, FL 34787
 City-St-Zip:
 OCOEE, FL 34761

Title: S () Delete Title: () Change () Addition

 Name:
 ROSEMAY, RAYMOND
 Name:

 Address:
 POBOX 680696
 Address:

 City-St-Zip:
 ORLANDO, FL 32868
 City-St-Zip:

Title: P () Delete Title: P (X) Change () Addition

Name: BOYER, JULIEN J Name: BOYER, JULIEN J Address: 409 REGAL DOWNS CIR Address: 1969 ANCIENT OAK DR City-St-Zip: WINTER GARDEN, FL 34787 City-St-Zip: OCOEE, FL 34761

I hereby certify that the information supplied with this filing does not qualify for the 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: JULIEN JEAN M BOYER P 04/29/2006