

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007809

FILED
Apr 27, 2009
Secretary of State

Entity Name: EGLISE BETHEL VALLEE DE BENEDICTION, INC.

Current Principal Place of Business:

12020 PINEHILLS RD
ORLANDO, FL 3208

New Principal Place of Business:

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
1969 ANCIENT OAK DR
OCOE, FL 34761 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: 1969 ANCIENT OAK DR
City-St-Zip: OCOEE, FL 34761

Title: S () Delete
Name: MARIE, CHACHA M
Address: 1969 ANCIENT OAK DR
City-St-Zip: OCOEE, FL 34761

Title: TR () Delete
Name: LINDOR, PIERRE
Address: 1969 ANCIENT OAK DR
City-St-Zip: OCOEE, FL 34761

Title: S () Delete
Name: JUNIE, BOYER
Address: POBOX 680696
City-St-Zip: ORLANDO, FL 32868

Title: P () Delete
Name: BOYER, JULIEN J
Address: 1969 ANCIENT OAK DR
City-St-Zip: OCOEE, FL 34761

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: JULIEN J BOYER

P

04/27/2009

Electronic Signature of Signing Officer or Director

Date