

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009108

FILED
May 01, 2008
Secretary of State

Entity Name: EGLISE BAPTISTE HAITIENNE LA TRINITE, INC.

Current Principal Place of Business:

3550 W. DAVIE BLVD.
FORT LAUDERDALE, FL 33312

New Principal Place of Business:

Current Mailing Address:

6221 NW 14 CT.
SUNRISE, FL 33313

New Mailing Address:

FEI Number: 11-3665708 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ELIZE, DAVID
6221 NW 14 CT.
SUNRISE, FL 33313 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: PO () Delete
Name: ELIZE, DAVID
Address: 6221 N.W. 14 CT.
City-St-Zip: SUNRISE, FL 33313

Title: T () Delete
Name: BEAUPLAN, PAUL
Address: 247 SW 7TH ST
City-St-Zip: DANIA, FL 33004

Title: S () Delete
Name: ELIZE, ANDREZE
Address: 6221 N.W. 14 CT.
City-St-Zip: SUNRISE, FL 33313

Title: D () Delete
Name: FLERIGENE, MEDELLUS
Address: 1516 N.W. 7 AVE. #1
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: D () Delete
Name: DUPERME, JONAS
Address: 2640 N.E. 8TH AVE., #65
City-St-Zip: WILTON MANORS, FL 33334

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: DAVID ELIZE

_____ Electronic Signature of Signing Officer or Director

PAST

05/01/2008

_____ Date