

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000139

FILED
May 02, 2006
Secretary of State

Entity Name: BETHANY HAITIAN BAPTIST MINISTRY, INC.

Current Principal Place of Business:

801 E HILLSBOROUGH AVE
TAMPA, FL 33604 US

New Principal Place of Business:

609 WEST WATERS AVENUE
TAMPA, FL 33604 US

Current Mailing Address:

P.O.BOX 292633
TAMPA, FL 33687 US

New Mailing Address:

FEI Number: 56-2423584 **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:

JEAN, DORET RA
801 E HILLSBOROUGH AVE
TAMPA, FL 33604 US

Name and Address of New Registered Agent:

JEAN, DORET RA
609 WEST WATERS AVENUE
TAMPA, FL 33604 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:

05/02/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JEAN, MARIE J P
Address: 13304 KITTEN DRIVE
City-St-Zip: TAMPA, FL 33617 US

Title: V () Delete
Name: EUSTACHE, JEAN V
Address: 1126 SOUTH 69TH STREET
City-St-Zip: TAMPA, FL 33619 US

Title: S/D () Delete
Name: JOSEPH, DOUNIA S/D
Address: 2602 E. GENESEE STREET
City-St-Zip: TAMPA, FL 33610 US

Title: T/D () Delete
Name: COMPERE, OLGUINE T/D
Address: 402 W. VIRGINIA AVENUE
City-St-Zip: TAMPA, FL 33603 US

Title: D () Delete
Name: MICHEL, HANDS D
Address: 1005 GRACE STREET
City-St-Zip: TAMPA, FL 33607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JEAN, MARIE J P
Address: 15501 BRUCE B. DOWNS BLVD. # 1205
City-St-Zip: TAMPA, FL 33647 US

Title: V (X) Change () Addition
Name: SIMON, FRITZNER V
Address: 6215 GONDOLA DRIVE
City-St-Zip: RIVERVIEW, FL 33569 US

Title: S/D (X) Change () Addition
Name: JOSEPH, DOUNIA S/D
Address: 1901 EAST ELLICOTT STREET
City-St-Zip: TAMPA, FL 33605 US

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 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: SIMON FRITZNER

V

05/02/2006

Electronic Signature of Signing Officer or Director

Date