


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2007 08:00 AM
Secretary of State

DOCUMENT # N04000000666	
1. Entity Name REHOBOTH EVANGELICAL BAPTIST CHURCH, INC.	

Principal Place of Business 1345 W KALEY ST ORLANDO, FL 32805	Mailing Address 1345 W KALEY ST ORLANDO, FL 32805
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DO NOT WRITE IN THIS SPACE



03172007 No Chg-NP CR2E037 (4/06)

4. FEI Number 32-2245654	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

ALEXIS, ISENARA
615 THOMAS JEFFERSON WAY
ORLANDO, FL 32809

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Alexis ISENARA Counselor **DATE** 3/29/07

(Signature, typed or printed name of registered agent and fee if applicable) (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	ALEXIS, LUC
STREET ADDRESS	615 THOMAS JEFFERSON WAY
CITY-ST-ZIP	ORLANDO, FL 32809
TITLE	DV
NAME	JEAN, EXAMA
STREET ADDRESS	1648 RAVENALL AVE
CITY-ST-ZIP	ORLANDO, FL 32811
TITLE	DT
NAME	JEAN-JACQUES, ESPERANCE
STREET ADDRESS	615 THOMAS JEFFERSON WAY
CITY-ST-ZIP	ORLANDO, FL 32809
TITLE	DS
NAME	JOSEPH, SELONDIEU
STREET ADDRESS	5242 AVENTURA BLVD
CITY-ST-ZIP	ORLANDO, FL 32809
TITLE	CSLR
NAME	ALEXIS, ISENDRA
STREET ADDRESS	615 THOMAS JEFFERSON HWY
CITY-ST-ZIP	ORLANDO, FL 32809
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/12/07-80005-014 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: Alexis L. Luc **DATE** 3/29/07 **Daytime Phone #** 407-5401143

(Signature and typed or printed name of signing officer or director)