2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011957

FILED Jun 07, 2006 Secretary of State

Entity Name: EGLISE DE DIEU LA REDEMPTION DE SION DE POINCIANA, INC.

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

707 DEL RIO WAY

KISSIMMEE, FL 34758

407 MARLBERRY LEAF AVE
KISSIMMEE, FL 34758

Current Mailing Address: New Mailing Address:

707 DEL RIO WAY 407 MARLBERRY LEAF AVE KISSIMMEE, FL 34758 KISSIMMEE, FL 34758

FEI Number: 30-0293766 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: Name and Address of New Registered Agent:

SAINTOCYR, MAX
707 DEL RIO WAY
KISSIMMEE, FL 34758 US
SAINT -CYR, MAX
407 MARLBERRY LEAF AVE
KISSIMMEE, FL 34758 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: MAX SAINT-CYR 06/07/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Name:
 SAINT-CYR, MAX
 Name:
 SAINT-CYR, MAX

 Address:
 707 DEL RIO WAY
 Address:
 407 MARLBARRY LEAF AVE

 City-St-Zip:
 KISSIMMEE, FL 34758
 City-St-Zip:
 KISSIMMEE, FL 34758

Title: D () Delete Title: () Change () Addition

 Name:
 EXUME, SONIA
 Name:

 Address:
 841 ADOUR DR
 Address:

 City-St-Zip:
 KISSIMMEE, FL 34759
 City-St-Zip:

 Name:
 LOUINISTE, JEAN M
 Name:
 SAINT-CYR, EXUMENE

 Address:
 655 AVENUE B SW SPT D
 Address:
 407 MARLBERRY LEAF AVE

 City-St-Zip:
 WINTER HAVEN, FL 33880
 City-St-Zip:
 KISSIMMEE, FL 34758

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: EXUMENE SAINT-CYR D 06/07/2006