

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 16, 2008**  
**Secretary of State**

DOCUMENT# N05000012390

Entity Name: PREMIERE EGLISE BAPTISTE HAITIENNE DE RIVERVIEW INC.

**Current Principal Place of Business:**

11728 STONE WOODGATE RD  
RIVERVIEW, FL 33569

**New Principal Place of Business:**

**Current Mailing Address:**

11728 STONE WOODGATE RD  
RIVERVIEW, FL 33569

**New Mailing Address:**

P.O BOX1071  
RIVERVIEW, FL 33568

FEI Number: 20-3924908

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DESRONVIL, NEMOURS  
11728 STONE WOODGATE RD  
RIVERVIEW, FL 33569 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: P ( ) Delete  
Name: DESRONVIL, NEMOURS  
Address: 11728 STONE WOODGATE RD  
City-St-Zip: RIVERVIEW, FL 33569

Title: T ( ) Delete  
Name: DORVAL, BERNARD  
Address: 11728 STONE WOODGATE RD  
City-St-Zip: RIVERVIEW, FL 33569

Title: D ( ) Delete  
Name: JUDE, ALEXIS  
Address: 11728 STONE WOODGATE RD  
City-St-Zip: RIVERVIEW, FL 33569

Title: D ( ) Delete  
Name: BONAMI, CALED  
Address: 11728 STONE WOODGATE RD  
City-St-Zip: RIVERVIEW, FL 33569

Title: D ( ) Delete  
Name: ELIODOR DESIR, FRANCK A  
Address: 11728 STONE WOODGATE RD  
City-St-Zip: RIVERVIEW, FL 33569

**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: DORVAL BERNARD

T

04/16/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date