

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000004400

**FILED**  
**Jan 05, 2010**  
**Secretary of State**

**Entity Name:** L'EGLISE BAPTISTE EBEN EZER, INC.

**Current Principal Place of Business:**

4490 ROCK SPRINGS RD  
APOPKA, FL 32712

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1467  
APOPKA, FL 32704

**New Mailing Address:**

**FEI Number:** 26-0201538

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FLEURIDOR, WILGAINS DR.  
5416 HOLT LAND DR  
APOPKA, FL 32712 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  
**Name:** FLEURIDOR, WILGAINS PASTOR  
**Address:** 5416 HOLT LAND DR  
**City-St-Zip:** APOPKA, FL 32712

**Title:** T  
**Name:** JEAN-BAPTISTE, MONA  
**Address:** 1165 MONTEAGLE CIR  
**City-St-Zip:** APOPKA, FL 32712

**Title:** S  
**Name:** FADAEL, JOSEPH  
**Address:** 5416 HOLT LAND DR  
**City-St-Zip:** APOPKA, FL 32712

**Title:** D  
**Name:** ALCINE, LUCIENNE MEMBER  
**Address:** 250 MORNING CREEK CIR  
**City-St-Zip:** APOPKA, FL 32712

I hereby 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 all other like empowered.

**SIGNATURE:** WILGAINS FLEURIDOR

DR

01/05/2010

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

\_\_\_\_\_  
Date