

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 11, 2001 8:00 am
Secretary of State

05-11-2001 90115 029 ***150.00

DOCUMENT # N07000004978

1. Entity Name
EGLISE DE DIEU-HAITIEN NE, INC.

Principal Place of Business 146 THERESA BLVD. PORT CHARLOTTE FL 33954	Mailing Address 146 THERESA BLVD. PORT CHARLOTTE FL 33954
21169 QUESADA AVE PT CHARLOTTE FL 33952	

2. Principal Place of Business Port Charlotte FLA	3. Mailing Address 21169 QUESADA AVE
Suite, Apt. #, etc. 19048 Edgewater Dr	Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State Port Charlotte FLA.	City & State Port. Charlotte FLA.	4. FEI Number	Applied For <input checked="" type="checkbox"/> Not Applicable
Zip 33958	Country USA	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
THOMAS, JEAN F
146 THERESA BLVD.
PORT CHARLOTTE FL 33954

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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.
 SIGNATURE Jean Fritznier Thomas, Pastor. S^m
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P THOMAS, JEAN F 146 THERESA BLVD. PORT CHARLOTTE FL 33954
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MOISE, WILNER 20526 EDGEWATER DR PT CHARLOTTE FL 33952
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LAFAILLE, VIVIANE 22210 HALLSTEAD AVE PT CHARLOTTE FL 33952
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BAPTISTE, CAROLE 163 SALEM AVE PT CHARLOTTE FL 33952
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jean Fritznier Thomas, Pastor. S^m **4/23/01-941) 629-8854**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)