

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003836

FILED  
Apr 20, 2009  
Secretary of State

Entity Name: MISSION COEUR DE JÉSUS DE LA PENTECOTE, INC.

**Current Principal Place of Business:**

532-46TH STREET  
WEST PALM BEACH, FL 33407 US

**New Principal Place of Business:**

**Current Mailing Address:**

769 SW. HAAS AVE  
PORT ST LUCIE, FL 34953 US

**New Mailing Address:**

FEI Number: 32-0251667

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CÉSAR, JEAN JUDE J  
769 SW HAAS AVE  
PORT ST LUCIE, FL 34953 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: CÉSAR, JEAN JUDE JR.  
Address: 769 SW HAAS AVE  
City-St-Zip: PORT ST LUCIE, FL 34953 US

Title: VP ( ) Delete  
Name: JULMISSE, DONAIS  
Address: 5967 NW 25 PLACE  
City-St-Zip: SUNRISE, FL 33313

Title: T ( ) Delete  
Name: GÉRARD, SIMON  
Address: 23-08 PIN-WAY DR.  
City-St-Zip: WEST PALM BEACH, FL 33415 US

Title: S ( ) Delete  
Name: POINVIL, JEAN OREL  
Address: 1555 NW M.LUTHER APT. M-103  
City-St-Zip: RIVERA BEACH, FL 33404 US

Title: C ( ) Delete  
Name: CÉSAR, MARIE K  
Address: 18 LAS ISLAS  
City-St-Zip: BOYTON BEACH, FL 33426 US

Title: M ( ) Delete  
Name: JEAN-BAPTISTE, JAMES G  
Address: 371 SW. FELMAN AVE  
City-St-Zip: PORT ST LUCIE, FL 34953 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: GERARD, SIMON  
Address: 23-08 PIN-WAY DR.  
City-St-Zip: WEST PALM BEACH, FL 33415 US

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: JEAN JUDE CESAR JR.

P

04/20/2009

Electronic Signature of Signing Officer or Director

Date