

FILE NOW: FILING FEE IS \$61.25

FILED
May 11 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N11713** (7)
1. Corporation Name
FIRST HAITIAN BAPTIST CHURCH OF JESUS-CHRIST INC

Principal Place of Business 1489 SRC 209 RUSSELL GREEN COVE SPRINGS FL 32043 US	Mailing Address PO BOX 1803 ORANGE PARK FL 32067 US
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3. Date Incorporated or Qualified 10/23/1985	
4. FEI Number 59-2613400	Applied For <input type="checkbox"/> Not Applicable

2. Principal Place of Business 21 1489 SRC 209 Russell Suite, Apt. #, etc. 22 GREEN COVE SPRINGS City & State 23 FLORIDA Zip 24 32043	2a. Mailing Address 25 PO BOX 1803 Suite, Apt. #, etc. 26 ORANGE PARK City & State 27 FLORIDA Zip 28 32067 Country 29 CLAY
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5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent
**SILAC, JEAN S REV
141 HERCULES DR
ORANGE PARK FL 32073**

10. Name and Address of New Registered Agent 81 Name SILAC, JEAN S. REV. 82 Street Address (P.O. Box Number Is Not Acceptable) 141 HERCULES DR. 83 84 City ORANGE PARK FL 85 Zip Code 32073
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE **Rev. Jean S. Silac** (NOTE: Registered Agent signature required when reinstating) DATE **4-28-98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SILAC, JEAN S	1.2 NAME	
STREET ADDRESS	141 HERCULES DR	1.3 STREET ADDRESS	
CITY-ST-ZIP	ORANGE PARK FL	1.4 CITY-ST-ZIP	
TITLE	VSD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SILAC, YVETTE	2.2 NAME	
STREET ADDRESS	141 HERCULES DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	ORANGE PARK FL	2.4 CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PIERRE, JEAN N.	3.2 NAME	
STREET ADDRESS	307 PEARWOOD	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIDDLEBUR FL	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JEAN, FRITZNER J	4.2 NAME	
STREET ADDRESS	1736 POPLAR DR	4.3 STREET ADDRESS	
CITY-ST-ZIP	ORANGE PARK FL	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOSSELINE, JEAN	5.2 NAME	
STREET ADDRESS	CIVILUS 255 G PRINGLE CIR	5.3 STREET ADDRESS	
CITY-ST-ZIP	MAGNOLIA SPRINGS FL	5.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SILAC, ZACHARY	6.2 NAME	
STREET ADDRESS	428 MADISON AVE, APT 17-C	6.3 STREET ADDRESS	
CITY-ST-ZIP	ORANGE PARK FL	6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Rev. Jean S. Silac** DATE: **4-28-98**

CR2E037 (10/97)