

# 2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 08, 2002 8:00 am  
Secretary of State

04-08-2002 90064 019 \*\*\*\*61.25

DOCUMENT # N11713

1. Entity Name

FIRST HAITIAN BAPTIST CHURCH OF JESUS-CHRIST INC

Principal Place of Business

Mailing Address

1484 STATE RD 209  
GREEN COVE SPRINGS FL 32043  
US

P.O. BOX 1803  
ORANGE PARK FL 32067  
US

2. Principal Place of Business

1484 State Rd 209

3. Mailing Address

P.O. BOX

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Green Cove Springs

Orange Park

City & State

City & State

Florida

Florida

Zip

Country

Zip

Country

32043

CLAY

32067

CLAY

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SILIAC, JEAN REV  
141 HERCULES DR  
ORANGE PARK FL 32073

Name  
REV. JEAN Siliac  
Street Address (P.O. Box Number is Not Acceptable)  
141 Hercules Dr  
Orange Park  
City  
FL  
Zip Code  
32073

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 S. Siliac

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

03-18-02

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
SILIAC, JEAN S  
141 HERCULES DR  
ORANGE PARK FL

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
ALEXANDRE JEAN SAM  
244 D. PRINGLE CIRCLE  
GREEN COVE SPRINGS, FL 32043

☒ Addition

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VSD  
SILIAC, YVETTE  
141 HERCULES DR  
ORANGE PARK FL

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Asst Pastor  
PIERRE, JEAN N.  
307 PEARWOOD  
MIDDLEBUR FL

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
JEAN, FRITZNER J  
1736 POPLAR DR  
ORANGE PARK FL

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
JOSSELINE, JEAN  
CIVILUS 255 G PRINGLE CIR  
MAGNOLIA SPRINGS FL

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
SILIAC, ZACHARY  
428 MADISON AVE, APT 17-C  
ORANGE PARK FL

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: REV. JEAN S. Siliac

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-18-02

Date

Daytime Phone #

CR2E037 (9/01)