

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2003 8:00 am
Secretary of State

04-16-2003 90194 021 ****61.25

DOCUMENT # N11713

1. Entity Name

FIRST HAITIAN BAPTIST CHURCH OF JESUS-CHRIST INC



Principal Place of Business

1484 STATE RD 209
GREEN COVE SPRINGS FL 32043
US

Mailing Address

P.O. BOX 1803
ORANGE PARK FL 32067
US

2. Principal Place of Business

1484 State RD 209
Suite, Apt. #, etc.
GREEN COVE SPRINGS

3. Mailing Address

P.O. BOX 1803
Suite, Apt. #, etc.



☐ CHECK HERE IF MAKING CHANGES

City & State

FLORIDA

City & State

ORANGE PARK
FLORIDA

4. FEI Number 59-2613400

Applied For

Not Applicable

Zip

32043

Country

CLAY

Zip

32067

Country

CLAY

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SILIAC, JEAN REV
141 HERCULES DR
ORANGE PARK FL 32073

7. Name and Address of New Registered Agent

Name **REV. JEAN S. SILIAC**
Street Address (P.O. Box Number is Not Acceptable)
141 HERCULES DR E
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Rev. Jean S. Siliac**

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

(NOTE: Registered Agent signature required when reinstating)

04-08-03

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

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

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

TITLE **T** ☐ Delete
NAME **PIERRE, JEAN N.**
STREET ADDRESS **307 PEARWOOD**
CITY-ST-ZIP **MIDDLEBUR FL**

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

TITLE **D** ☐ Delete
NAME **JOSSIELINI, JEAN**
STREET ADDRESS **CIVILUS 255 G PRINGLE CIR**
CITY-ST-ZIP **MAGNOLIA SPRINGS FL**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **Sunday School Director** ☐ Change ☒ Addition
NAME **Jean Sam Alexandre**
STREET ADDRESS **244 D PRINGLE CIRCLE**
CITY-ST-ZIP **GREEN COVE SPRINGS FL 32043**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☒ Change ☐ Addition
NAME **JOSSIELINI JEAN, CIVILUS**
STREET ADDRESS **243 B PRINGLE CIRCLE**
CITY-ST-ZIP **GREEN COVE SPRINGS FL 32043**

TITLE **DIRECTOR, SECRETARY** ☒ Change ☐ Addition
NAME **SILIAC, ZACHARY**
STREET ADDRESS **2850 W Marion St**
CITY-ST-ZIP **ORANGE PARK, FL 32065**

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**

04-08-03

CR2E037 (10/02)