

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19887

FILED
Mar 29, 2009
Secretary of State

Entity Name: FIRST HAITIAN CHURCH OF THE NAZARENE OF APOPKA, INC.

Current Principal Place of Business:

1428 S. LAKE AVENUE
APOPKA, FL 32703

New Principal Place of Business:

Current Mailing Address:

1428 S. LAKE AVENUE
APOPKA, FL 32703

New Mailing Address:

FEI Number: 59-3351240

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOSEPH, ANTIONE
449 W. 17TH STREET
APOPKA, FL 32703 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: D () Delete
Name: JOSEPH, ANTIONE
Address: 449 W 17TH STREET
City-St-Zip: APOPKA, FL 32703

Title: T () Delete
Name: JOSEPH, MERICIA
Address: 449 W. 17TH ST.
City-St-Zip: APOPKA, FL 32703

Title: T () Delete
Name: FORVIL, PIERRE
Address: POST OFFICE BOX 984
City-St-Zip: ZELLWOOD, FL 32798

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ANTOINE JOSEPH

D

03/29/2009

Electronic Signature of Signing Officer or Director

Date