

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21391

FILED  
Apr 10, 2009  
Secretary of State

**Entity Name:** EGLISE DE DIEU MONT DES OLIVIERS LA NOUVELLE JERUSALEM, INC.

**Current Principal Place of Business:**

11110 N.W. 6TH AVENUE  
MIAMI, FL 33168

**New Principal Place of Business:**

**Current Mailing Address:**

11110 N.W. 6TH AVENUE  
MIAMI, FL 33168

**New Mailing Address:**

**FEI Number:** 65-0261024

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

LAUORE, JEAN  
11110 N.W. 6TH AVENUE  
MIAMI, FL 33168 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: PD ( ) Delete  
Name: LAUORE, JEAN O.  
Address: 11110 N.W. 6 AVE.  
City-St-Zip: MIAMI, FL 33168 DA

Title: M ( ) Delete  
Name: DETEMPS, BONTE  
Address: 7272 N.E. 6TH CT., APT. 4  
City-St-Zip: MIAMI, FL

Title: TD ( ) Delete  
Name: BAPTISTE, YANICK JEAN  
Address: 735 N.W. 144 ST.  
City-St-Zip: MIAMI, FL

Title: VD ( ) Delete  
Name: LAMISERE, DELPHRA  
Address: 4977 SW 166 ST AVE  
City-St-Zip: MIAMI, FL 33167

Title: MGR ( ) Delete  
Name: LAMOTHE, AUGUSTE  
Address: 166 NW 117 ST  
City-St-Zip: MIAMI, FL 33167

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

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

Title: M (X) Change ( ) Addition  
Name: DETEMPS, BONTE  
Address: 1763 NW 142 STREET  
City-St-Zip: MIAMI, FL 33054

Title: TD (X) Change ( ) Addition  
Name: BAPTISTE, YANICK JEAN  
Address: 735 N.W. 144 ST.  
City-St-Zip: MIAMI, FL 33168

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 LAUORE

PD

04/10/2009

Electronic Signature of Signing Officer or Director

Date