

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25260

FILED
Mar 23, 2009
Secretary of State

Entity Name: EGLISE BAPTISTE BETHANIE DE FT. LAUDERDALE, INC.

Current Principal Place of Business:

2200 NW 12 AVENUE
FT. LAUDERDALE, FL 33311

New Principal Place of Business:

Current Mailing Address:

2200 NW 12 AVENUE
FT. LAUDERDALE, FL 33311

New Mailing Address:

FEI Number: 65-0038136

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

USLER, AUGUSTE
2200 NW 12 AVENUE
FORT LAUDERDALE, FL 33311 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: P () Delete
Name: AUGUSTE,, USLER
Address: 4521 NW 5TH PL.
City-St-Zip: PLANTATION, FL 33317

Title: D () Delete
Name: NORD,, VERDIEU
Address: 3681 SW KASIN STREET
City-St-Zip: PORT ST-LUCIE, FL 34953

Title: D () Delete
Name: ST- REMY,, ANDY
Address: 4961 CYPRESS LANE
City-St-Zip: COCONUT CREEK, FL 33073

Title: S () Delete
Name: MONDESIR, ELINA
Address: 467 CORAL AVE. SE
City-St-Zip: PALM BAY, FL 32909

Title: S () Delete
Name: JEUDY, IRMA
Address: 824 NW 103 STREET
City-St-Zip: MIAMI, FL 33150

Title: T () Delete
Name: JOSEPH, ERTA
Address: 1219 NW 18 STREET
City-St-Zip: FORT LAUDERDALE, FL 33311

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:

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: USLER AUGUSTE

P

03/23/2009

Electronic Signature of Signing Officer or Director

Date