

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

06 MAY -8 AM 10:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N36608			
1. Entity Name UNITED HAITIAN BAPTIST CHURCH, INC.			
Principal Place of Business 525 S FLAGLER DR STE 200 WEST PALM BEACH, FL 33401 US		Mailing Address POB 222575 WEST PALM BEACH, FL 33422 US	
2. Principal Place of Business 2015 PARKER AVE Suite, Apt. #, etc.		3. Mailing Address 2015 PARKER AVE Suite, Apt. #, etc.	
City & State West PALM Bch, FL Zip 33401		City & State West PALM Bch, FL Zip 33401	
Country USA		Country USA	
4. FEI Number 65-0287465		Applied For Not Applicable	
5. Certificate of Status Desired ☐		58.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MESCHES, LARRY M P A 525 S FLAGLER DR STE 200 WEST PALM BEACH, FL 33401		7. Name and Address of New Registered Agent Name DIEULIMENE TURENNE Street Address (P.O. Box Number is Not Acceptable) 401 W. 30th St City RIVIERA Bch FL Zip Code 33404	
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 <i>Dieulimene Turanne</i> Signature, typed or printed name of registered agent and fee if applicable.		DATE 5/3/06 (NOTE: Registered Agent signature required when reinstating)	
Amended AR 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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTR LAUORE, JEAN J 123 LAINHART COURT WEST PALM BEACH, FL 33409 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	THEUS, WISLER-P ☒ Change ☐ Addition 1346 WESTOVER RD. WEST PALM Bch, FL 33417
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STR ALEXIS, ROSE M 735 7TH WAY WEST PALM BEACH, FL 33407 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MERISIER, PAUL - T ☒ Change ☐ Addition 389 MONTE TRAIL WEST PALM Bch, FL 33415
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TTR PIERRE-LOUIS, MARIE V 5812 BARBADOS WAY WEST WEST PALM BEACH, FL 33407 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ROUZARD, HUBERT - T ☒ Change ☐ Addition 854 ILEX DR. LAKE PARK, FL 33404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR JEAN-LOUIS, MAXIME VP 8554 GENEVA STREET LAKE WORTH, FL 33467 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	LAUORE, RENAN - VP ☒ Change ☐ Addition 12411 SUMMER SPRINGS DR. BOYNTON Bch, FL 33437
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR DUCLOS, MARIE C 5291 KIM COURT WEST PALM BEACH, FL 33415 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	FRANCISQUE, R. ANANIE-S ☒ Change ☐ Addition 1315 LONGWOOD ST. WEST PALM Bch, FL 33401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete B 5/15/06	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 600075214816 05/25/06--01004--006 **\$61.25
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Walter...</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		5/03/06 (56)644-7773 Date If Any Phone #	