

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37497

FILED  
Apr 20, 2012  
Secretary of State

**Entity Name:** HAITIAN FIRST ASSEMBLY OF GOD OF IMMOKALEE, FLORIDA, INC.

**Current Principal Place of Business:**

320 S FIRST ST  
IMMOKALEE, FL 34142

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 1680  
IMMOKALEE, FL 34143

**New Mailing Address:**

**FEI Number:** 65-0341264

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEBRUN, ANNUEL  
320 S FIRST ST  
IMMOKALEE, FL 34142 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  
Name: LEBRUN, ANNUEL  
Address: 801 MONROE AVE.  
City-St-Zip: IMMOKALEE, FL 34142

Title: V  
Name: RENOLD, JEAN  
Address: 919 ALFREDA AVE.  
City-St-Zip: IMMOKALEE, FL 34142

Title: D  
Name: RANCY, ANICCA  
Address: 423 CANDLEWICK CIR. S.  
City-St-Zip: LEHIGH ACRES, FL 33936

Title: D  
Name: ST.FLEUR, NICOLAS  
Address: 223 SCHOOL SIDE DR.  
City-St-Zip: LEHIGH ACRES, FL 33936

I hereby 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 all other like empowered.

SIGNATURE: ANICCA RANCY

D

04/20/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date