

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 30, 2008 8:00 am
Secretary of State

04-30-2008 90155 027 *****61.25

DOCUMENT # N37864

1. Entity Name

HAITIAN CHURCH OF THE BRETHREN, INC.



Principal Place of Business

520 NW 103 ST.
MIAMI FL 33150
US

Mailing Address

545 NW 102 ST.
MIAMI FL 33150
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

1st MOORE

CR2E037 (10/07)

4. FEI Number

65-0202162

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LUDOVIC, ST. FLEUR
545 NW 102 ST.
MIAMI FL 33150

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature is not used when re-registering)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

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

TITLE: D ☐ Delete
NAME: ST FLEUR, LUDOVIC
STREET ADDRESS: 2400 N MIAMI AVE.
CITY- ST- ZIP: MIAMI FL

TITLE: D ☐ Delete
NAME: ATTELUS, SERVILIA
STREET ADDRESS: 1190 NW 122 STREET
CITY- ST- ZIP: MIAMI FL 33168

TITLE: D ☐ Delete
NAME: PIERRE, HENRY K.
STREET ADDRESS: 53 NW 52
CITY- ST- ZIP: MIAMI FL

TITLE: D ☐ Delete
NAME: SUTTON, WAYNE
STREET ADDRESS: 680 NE 165 ST N
CITY- ST- ZIP: MIAMI BEACH FL 33162

TITLE: D ☐ Delete
NAME: JOSEPH, SILFIDA
STREET ADDRESS: 942 NE 108 ST
CITY- ST- ZIP: MIAMI FL 33161

TITLE: D ☐ Delete
NAME: LEDESE, JASMIN
STREET ADDRESS: 1665 NW 121 ST.
CITY- ST- ZIP: MIAMI FL 33167

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY- ST- ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY- ST- ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY- ST- ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY- ST- ZIP:

TITLE: ☒ Change ☐ Addition
NAME: Secretary "Secrétaire"
STREET ADDRESS: HAENER J. ELIE
CITY- ST- ZIP: 19701 SW 110th Ct. Apt 231
CUTLER BAY FL 33157

TITLE: ☒ Change ☐ Addition
NAME: DEACON (DIACRE)
STREET ADDRESS: Frederick Ecclesiastes
CITY- ST- ZIP: 530 NW 105th Street
MIAMI, FL 33150

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Ludovic St. Fleur*

4-14-08 305-758-6384