

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N 38996
 1. Entity Name
FIRST HAITIAN BAPTIST CHURCH OF ORLANDO, INC

FILED
Apr 26, 2000 8:00 am
Secretary of State

04-26-2000 90209 047 ****61.25

Principal Place of Business
4701 LENOX BLVD
ORLANDO, FL 32811

Mailing Address

947845

2. Principal Place of Business
4701 LENOX BLVD
 Suite, Apt. #, etc.

3. Mailing Address
2201 KINGSLAND AVE
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
ORLANDO FL
 Zip
32811
 Country
USA

City & State
ORLANDO FL
 Zip
32808
 Country
USA

4. FEI Number
593046205
 Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
ANTOINE VILLARD FILS-AIME
2201 KINGSLAND AVE
ORLANDO, FL 32808

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.

SIGNATURE Antoine Villard
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/22/2000
 DATE

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>PRESIDENT</u> <u>ANTOINE V FILS-AIME</u> <u>2201 KINGSLAND AVE</u> <u>ORLANDO, FL 32808</u>	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>OFFICER</u> <u>JOSE BARTAZAR</u> <u>1714 W. GRANT STREET</u> <u>ORLANDO, FL 32805</u>	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>OFFICER</u> <u>LUCKY F PIERRE</u> <u>216 Longleaf Ct</u> <u>ORLANDO, FL 32835</u>	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>OFFICER</u> <u>SALWAJ Jean</u> <u>3027 Rockingham Circle</u> <u>ORLANDO, FL 32808</u>	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Antoine Villard (ANTOINE FILS AIME) 4/22/2000 (407) 578-6988
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)