SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 0, 1995.
AMOUNT DUE ON OR BEFORE 6/30/95: $100 (IF DISSOLVED, REINSTATEMENT AMOUNT DUE TO REINSTATE: $500)

NONPROFIT CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 30 AM 9:12

DOCUMENT # **N43089** **(4)**

1. Corporation Name

FIRST HAITIAN BAPTIST CHURCH OF INWOOD, INC.

Principal Place of Business	Mailing Address
3737 AVENUE S. N.W. WINTER HAVEN FL 33881	3737 AVENUE S. N.W. WINTER HAVEN FL 33881

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/18/1991
3a. Date of Last Report: 03/07/1994
4. FEI Number: 59-3065969 — Applied For ☐ Not Applicable ☐
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — FILING FEE IS $61.25
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 INwood-Winter H.	26 3737
22 Suite, Apt. #, etc: Winter. Haven 3737	27 Suite, Apt. #, etc: AVE S N W
23 City & State: W. Haven FL.	28 City & State: Winter Haven FL
24 Zip: 33881 — 25 Country	29 Zip: 33881 — 30 Country: INwood

9. Name and Address of Current Registered Agent

THEODORE, IGINAC
3737 AVENUE S, N.W.
WINTER HAVEN FL 33881

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (A-J)	
TITLE	PD	11 TITLE	☐ Change ☐ Addition
NAME	THEODORE, IGINAC	12 NAME	Rev. Marc Chery
STREET ADDRESS	3737 AVENUE S, N.W.	13 STREET ADDRESS	3737 AVENUE S N W
CITY ST ZIP	WINTER HAVEN FL	14 CITY ST ZIP	WINTER HAVEN FL 33881
TITLE	VD	21 TITLE	☐ Change ☐ Addition
NAME	JEAN-PAUL, JEAN	22 NAME	
STREET ADDRESS	3020 ERNEST DR, APT C	23 STREET ADDRESS	
CITY ST ZIP	AUBURNDALE FL	24 CITY ST ZIP	SAME.
TITLE	SD	31 TITLE	☐ Change ☐ Addition
NAME	DUBREVIL, MARIE-FLORE	32 NAME	
STREET ADDRESS	3020 ERNEST DR, APT D	33 STREET ADDRESS	
CITY ST ZIP	AUBURNDALE FL	34 CITY ST ZIP	SAME.
TITLE	D	41 TITLE	☐ Change ☐ Addition
NAME	GLESIL, RAYMOND J	42 NAME	
STREET ADDRESS	731 30TH STR NW	43 STREET ADDRESS	
CITY ST ZIP	WINTER HAVEN FL	44 CITY ST ZIP	SAME.
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	Frederick Vaugh
STREET ADDRESS		53 STREET ADDRESS	2200 Lucerne Terrace
CITY ST ZIP		54 CITY ST ZIP	Winter Haven FL 33880
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

CR2E037 (3/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ Date _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0014100