

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

FILED
Jan 23, 2007 8:00 am
Secretary of State

01-23-2007 90020 001 *****5.00
01-23-2007 90020 002 *****61.25

DOCUMENT # N92000000394

1. Entity Name

Eglise de Dieu Pentecostal-inc



DO NOT WRITE IN THIS SPACE

66000287

2. Principal Place of Business

Eglise de Dieu Pent-

Suite, Apt. #, etc.

625-EAST 7TH ST

City & State

PANAMA CITY FL

Zip
32401

Country
FL

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

Applied For

Not Applicable

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

7. Name and Address of Current Registered Agent

Name

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

City

FL

Zip Code

**DO NOT WRITE
IN THIS SPACE**

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 Andre E Jules

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

(NOTE: Registered Agent signature required when reinstating)

DATE

01-19-07

FEE IS \$61.25
Initial or Amended AR

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
NAME
STREET ADDRESS
CITY-ST-ZIP
Eglise de Dieu PENTECOSTAL INC
625. EAST 7TH ST
PANAMA CITY FL 32401

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
RV. PASTOR ANDRE E JULES
625- EAST- 7TH ST
PANAMA CITY FL 32401

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SECRETARY PIERRE JULES
625- EAST 7TH ST
PANAMA CITY FL 32401

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TRESS. BERVANIE JULES
625- EAST- 7TH ST
PANAMA CITY FL 32401

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: R/V PASTOR Andre E Jules

01-19-07

785-6441