

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003062

FILED
Jan 13, 2009
Secretary of State

Entity Name: EGLISE DE DIEU EVANGELIQUE CHURCH OF GOD, INC.

Current Principal Place of Business:

12800 N.E. 6TH AVE.
NORTH MIAMI, FL 33161

New Principal Place of Business:

Current Mailing Address:

12800 N.E. 6TH AVE.
NORTH MIAMI, FL 33161

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

THOMAS, MARIE J
12800 NE 6 AVENUE
NORTH MIAMI, FL 33161 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: PD () Delete
Name: RAPHAEL, SIMON PASTOR
Address: 121 NE 110TH ST.
City-St-Zip: MIAMI, FL 33161

Title: VD () Delete
Name: SIMON, JEMIMA
Address: 575 N.E. 127TH ST.
City-St-Zip: MIAMI, FL 33161

Title: VD () Delete
Name: VIL, GLADYS
Address: 851 NE 158TH STREET
City-St-Zip: MIAMI, FL 33161

Title: TD () Delete
Name: JOSIUS, JOSEPH
Address: 12830 N.E. 6TH AVE.
City-St-Zip: MIAMI, FL 33161

Title: ATD () Delete
Name: PIERRE, ALOURDES
Address: 1258 NE 112TH STREET
City-St-Zip: MIAMI, FL 33161

Title: SD () Delete
Name: THOMAS, MARIE J
Address: 470 NE 103RD STREET
City-St-Zip: MIAMI, FL 33161

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RAPHAEL, SIMON PASTOR
Address: 12800 NE 6TH AVE.
City-St-Zip: MIAMI, FL 33161

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: GAUTHIER, JUDITH
Address: 870 NE 180 STREET
City-St-Zip: MIAMI, FL 33162

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RAPHAEL SIMON

PD

01/13/2009

Electronic Signature of Signing Officer or Director

Date