

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N94000001555

FILED
Oct 14, 2009
Secretary of State

Entity Name: EGLISE BAPTISTE DE LA RECONCILIATION, INC.

Current Principal Place of Business:

1870 N STATE ROAD 7
MARGATE, FL 33063

New Principal Place of Business:

Current Mailing Address:

1870 N STATE ROAD 7
MARGATE, FL 33063

New Mailing Address:

FEI Number: 65-0365296

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JEAN-LOUIS, FRANTZ REV
5290 S.W. 8TH STREET
MARGATE, FL 33068 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: FRANTZ JEAN-LOUIS

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JEAN-LOUIS, FRANTZ REV.
Address: 5290 S.W. 8TH STREET
City-St-Zip: MARGATE, FL 33068

Title: D () Delete
Name: LEONCE, ALCIRA DEACON
Address: 6006 CORAL GATE BLD 5
City-St-Zip: MARGATE, FL 33063

Title: T () Delete
Name: RONEL, JOSEPH TREASUR
Address: 12383 NW 54 TH COURT
City-St-Zip: CORAL SPRINGS, FL 33076

Title: C () Delete
Name: JEAN-LOUIS, MARIE COUNSEL
Address: 5290 S.W. 8TH STREET
City-St-Zip: MARGATE, FL 33068

Title: S () Delete
Name: MARTHE, GERARD SECRETA
Address: 9201 LINE BAY BLD 12 APT 204
City-St-Zip: TAMARAC, FL 33321

Title: D () Delete
Name: ROMELUS, ELIEZER DEACON
Address: 3108 BAYBERRY WAY
City-St-Zip: MARGATE, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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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: FRANTZ JEAN LOUIS

REV.

10/14/2009

Electronic Signature of Signing Officer or Director

Date