

FILE NOW: FILING FEE IS \$61.25

FILED
May 21 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N94000001608 (8)
1. Corporation Name
PREMIERE EGLISE BAPTISTE HAITIENNE DE BOCA RATON, INC.



Principal Place of Business 7451 LADSON TERRACE LAKE WORTH FL 33467	Mailing Address 7451 LADSON TERRACE LAKE WORTH FL 33467
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3. Date Incorporated or Qualified 03/28/1994	
4. FEI Number NOT APPLICABLE	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent

**BUSBY, ALBERTO F
706 S.W. 23RD AVE.
BOYNTON BEACH FL 33435**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD <input type="checkbox"/> DELETE
NAME	JOSEPH, REV. JEAN C
STREET ADDRESS	7451 LADSON TERRACE
CITY-ST-ZIP	LAKE WORTH FL 33467
TITLE	SD <input type="checkbox"/> DELETE
NAME	ST. LOUIS, MONIQUE
STREET ADDRESS	10080 BOYNTON PLACE CR.
CITY-ST-ZIP	BOYNTON FL 33437
TITLE	TD <input type="checkbox"/> DELETE
NAME	BENOIT, REV. ERICK
STREET ADDRESS	3063 DORSON WAY
CITY-ST-ZIP	DELRAY BEACH FL 33445
TITLE	D <input type="checkbox"/> DELETE
NAME	NASHBI, BERNARD J
STREET ADDRESS	2488 DORSON WAY
CITY-ST-ZIP	DELRAY BEACH FL 33445
TITLE	D <input type="checkbox"/> DELETE
NAME	PHILIPPES, ROSIAS J
STREET ADDRESS	2488 DORSON WAY
CITY-ST-ZIP	DELRAY BEACH FL 33445
TITLE	D <input type="checkbox"/> DELETE
NAME	GUERRIER, REV. JEAN D
STREET ADDRESS	1154 S.W. 23RD AVE.
CITY-ST-ZIP	BOYNTON BEACH FL 33426

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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: *REV. JEAN CLAUDE JOSEPH* *Rev. Claude Joseph 05/98*

CR2E037 (10/97)