2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N94000002877

FILED Oct 15, 2009 Secretary of State

Entity Name: FIRST HOREB HAITIAN BAPTIST CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business:

237 JOEL BLVD

LEHIGH ACRES, FL 33972 US

Current Mailing Address: New Mailing Address:

7715 WOODBROOK CIR APT 3404 NAPLES, FL 34104 US

FEI Number: 65-0555271 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MATHEUS, ODMANNE 1037 NW 116 AVE CORAL SPRINGS, FL 33071 US

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete MATHEUS, JEROME G MATHEUS, JEROME G Name: Name:

406 7TH E STREET Address: 406 7TH E STREET Address: LEHIGH ACRES, FL 33972 City-St-Zip: City-St-Zip: LEHIGH ACRES, FL 33972

Title: Title: (X) Change () Addition () Delete CELESTIN, WILFRANCE Name: ODMANNE, MATHEUS PRES Name: Address: 3208 10TH ST SW Address: 1037 NW 116TH AVE

City-St-Zip: LEHIGH ACRES, FL 33976 City-St-Zip: CORAL SPRINGS, FL 33071 US

Title: () Delete Title: (X) Change () Addition ELUSME, ELICIEN Name: MATHEUS, FRANTZ G VP Name: 7715 WOODBROOK CR. APT 4 Address: 630 BEACH AVE S. Address: City-St-Zip: LEHIGH ACRES, FL 33974 City-St-Zip: NAPLES, FL 34104 US

() Delete Title: Title: () Change (X) Addition

Name: Name: TELUSMA, JEAN CHARM 9566 BLUESTONE CR. Address: Address: City-St-Zip: City-St-Zip: FORT MYERS, FL

Title: () Delete Title: () Change (X) Addition

MATHEUS, LIONEL Name: Name: 504 LINCOLN AVE Address: Address:

City-St-Zip: City-St-Zip: LEHIGH ACRES, FL 33936 US

Title: () Delete Title: () Change (X) Addition DUNCAN, GEORGE Name: Name:

Address: Address: 205 JOEL BLVD SUITE 208 LEHIGH ACRES, FL 33936 US City-St-Zip: 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: ODMANNE MATHEUS, POA P/D 10/15/2009