2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # N9400003941 1. Entity Name HAITIAN BETHESDA BAPTIST CHURCH, INC. Principal Place of Business Mailing Address 6120 GOLDEN GATE PARKWAY P.O. BOX 8101 NAPLES FL 33999 NAPLES FL 33941 HS 3. Mailing Address 2. Principal Place of Business Loag Suite, Apt. #, etc. Suite. Apt. #. etc <u>Xables</u> Cit√& State City & State Country

6. Name and Address of Current Registered Agent

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

OFFICERS AND DIRECTORS

FILE NOW:

FEE IS \$61.25

DORNEVIL, MARC M

NAPLES FL 34103

DORNEVIL, ETILIA

NAPLES FL 34103

1319 GRANDA BLVD

FORTUNE, ASSONDIEU

4073 COCONUT CIR

DORNEVIL, MARC M

NAPLES FL 34103

DORNEVIL, ETILIA

NAPLES FL 34103

NAPLES FL

6319 GRANADA BLVD

FORTUNE, ASSONDIEU

4629 BAYSHORE DR. APT J-4

1319 GRANADA BLVD

NAPLES FL 34102

1319 GRANADA BLVD

FORTUNE, ASSONDIEU 4623 BAYSHORE DR APT J4

D

NAPLES FL 34112

SIGNATURE

10.

TITLE

NAME

TITLE

NAME

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NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

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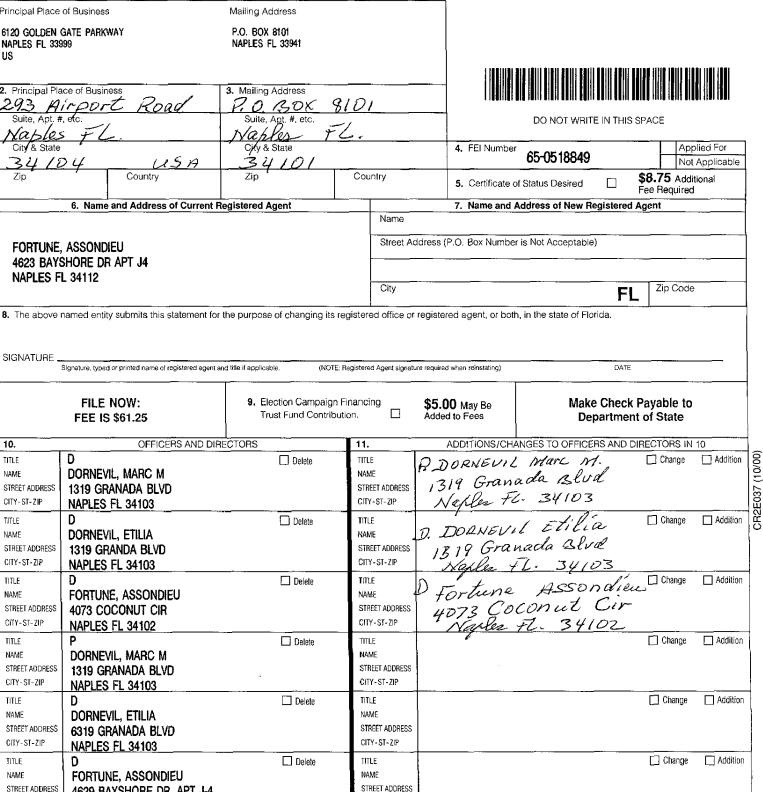
CITY-ST-7IP

CITY-ST-ZI₽

CITY-ST-ZIE

FILED Feb 28, 2001 8:00 am Secretary of State

2-28-2001 90051 041 ****61.25



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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

Name

11.

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

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9. Election Campaign Financing

Trust Fund Contribution.

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR