2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empo

SIGNATURE:

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 10, 2000 8:00 am Secretary of State DOCUMENT # **N94000006245** 1. Entity Name HAITIAN MISSION BAPTIST CHURCH OF BETHANY, INC. 04-10-2000 90064 006 ****61.25 Principal Place of Business Mailing Address 7421 BROCKBANK DR. 1005 W OAKRIDGE RD ORLANDO FL 32809-6350 ORLANDO FL 32809 2. Principal Place of Business 3. Mailing Address 6500 WINE Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State 4. FEI Number 59-3294816 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) SAINTIL, RAYMOND 7421 BROCKBANK DR ORLANDO FL 32809 City Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be П Trust Fund Contribution. Added to Fees **Department of State FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME SAINTIL, RAYMOND **CR2E037** STREET ADDRESS STREET ADDRESS 7421 BROCKBANK DR CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32809 VΡ ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME BERNADETTE, SAINTIL STREET ADDRESS STREET ADDRESS 7421 BROCKBANK DR CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32809 8555IVER COURT Change Addition OPLAND, Florida 32809 8555IVER COURT Change Addition ☐ Delete TITLE TITLE NAME NAME LOUIS, YVONNE STREET ADDRESS STREET ADDRESS 3774 RIO GRAND SU T CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32809 ☐ Delete TITLE TITLE NACILIAN, LOUIS NAME NAME ORLANDO, Florida 32809 STREET ADDRESS STREET ADDRESS 3774 RIO GRAND SU T CITY-ST-7IP CITY-ST-ZIP ORLANDO FL 32839 TITLE Delete TITLE ROMEUS, DIEUONNE L NAME NAME STREET ADDRESS STREET ADDRESS 7254 JONQUIL DR. CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32818 TITLE TITLE Delete NAME JOSEPH, MARIE NAME STREET ADDRESS STREET ADDRESS 3762 WATER OAKS DR CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32818 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. Turnier 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

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