FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 30 1997 8:00am

Aller 107 Frist of

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9500003599 (6)

EGLISE EVANGELIQUE LUTHERIENNE HAITIENNE INC.

Principal Place of Business		Mailing Address			#	BEILL BEILE SELDE SCIOL SISSE	10115 (511 1001	
5356 BOSQUE LANE SUITE 115 W. PALM BEACH FL 33415		5356 BOSQUE LANE SUITE 115 W. PALM BEACH FL 33415-2637						
				3. Date Incorporated or Qualified 07/28/1995	3a. Date of Last R 03/29/19	leport 1 96		
2. Principal Place of Business		2a. Mailing Address 26		4. FEI Number 65-0501899	├	pplied For ot Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	□ \$8.75 ·	Additional		
City & State		City & State		& Floation Commuter Financing	Fee Required 6. Flection Campaign Financing \$5.00 May Be			
23		28		Trust Fund Contribution		nay be to Fees		
Zip Country		Zip Country		8. This corporation has liability for intangible tax under s. 199.032,				
24	25 29 29 29 S. Name and Address of Current Registered		30		Florida Statutes Yes No 10. Name and Address of New Registered Agent			
	g. Hame and Abbress of Current	nogistered Agent	81	Nam		gistored Agent		
BARTLEY	/, DANIEL		82 Street Add		ol Address (P.O. Box Number is Not Accepta	hle)		
5356 BO	SQUE LANE #115				Address (1.0. bbx Humber is Not Acceptable)			
WEST P	ALM BEACH FL 33415		83					
			84	City		FL 85 Zip	Code	
11. Pursuant t	o the provisions of Sections 617.0502	ano 617,1508, Florida Stat	utes, the abov	L re-name	ed corporation submits this statement for the	purpose of changing it	ts registered	
office or re agent. I as	agistered agent, or both, in the State on familiar with, and accept the obligation	of Florida. Such change was tions of, Section 617.0503, I	s authorized b Florida Statute	y the co s.	proporation's board of directors. I hereby acce	pt the appointment as	registered	
SIGNATURE								
12.	Signature, typed or printed name of registered ages OFFICERS AND		OFF Registered Ap	ent signal	ure required wher reinstating) ADDITIONS/CHANGES TO OFFI	DATE OF BS AND DIRECTOR	28 IN 12	
TITLE	P	DELETE	1.1 TIBLE		ADDITIONS/GIVINGEO TO OTT	Change	Add tion	
NAME	BARTLEY, DANIEL REV.	1.2					_	
STREET ADDRESS	5356 BOSQUE LANE, SUITE	115	1.3 STREE	T ADDRES	s			
CITY-ST-ZIP	W. PALM BEACH FL 33415		1.4 CITY+S1-7IP					
TITLE	Ť	DELETE				Change	Addition	
NAME .	SERGILES, JOEL		2.2 NAME					
STREET ADDRESS	EVERGLADES STREET #14			1 ACORES	S			
CITY-ST-ZIP	BELLE GLADE FL 33430	: PL 33430		ST- ZIP		Change	Addition	
NAME	BARTLEY, ANNE		3.1 TITLE 3.2 NAME			change	roution	
STREET ADDRESS	5356 BOSQUE LANE #115			1 ADDRES	s			
CITY-ST-ZIP	W. PALM BEACH FL 33415		3.4. CITY					
TOTLE	T	DELETE	4.1 TOLE			☐ Change	Addition	
NAME	JEANTY, MAGUELITA		4. 2 NAM					
STREET ADDRESS	2413 PALM GLADE DRIVE		4.3 STREE	1 ADDRES	s			
CITY-ST-ZIP	BELLE GLADE FL 33430		4.4 C(1) Y -	SI-ZIP				
TITLE	ī	☐ DELETE	5.1 TITLE			Change	Addition	
NAME	CLAIR, MAXO SAINT		5.2 NAME		l			
STREET ADDRESS	561 SW 8TH STREET34			1 ADORES				
CHY-ST-ZIP	BELLE GLADE FL 33460			\$1 - ZIP	BELLE GLADE, FL 33	430 ☐ Change	Addition	
THILE			61 TITLE			<u> —</u> онапус	☐ WOORIUR	
NAME STREET ADDRESS			6.2 NAME	LADADCE	c			
CITY-ST-ZIP			64 CITY-	LADDRES Stazie	°			
14. I do heret	by certify that the information supplied	with this filing does not out	ality for the ex	emption	stated in Section 119.07(3)(i), Florida Statute	es. I further certify that	the	
I am an oi	n indicated on this annual report or si ficer or director of the corporation or n Block 12 or Block 13 if changed, or	the receiver or trustee empi	owered to exe	urate a cute thi	nd that my signature shall have the same log s report as required by Chapter 617, Florida	al effect as if made un Stalutes; and that my i	ider oath, that riame	