


**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Sep 03, 2004 08:00 AM
Secretary of State

DOCUMENT # N95000005984 1. Entity Name EGLISE BAPTISTE HAITIENNE BETHLEEM, INC.	
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Principal Place of Business 425 CRESCENT DR LAKE PARK, FL 33403	Mailing Address 425 CRESCENT DR LAKE PARK, FL 33403
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DO NOT WRITE IN THIS SPACE



09012004 No Chg-NP CR2E037 (10/03)

4. FEI Number 65-0637177	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

EGLISE BAPTIST HAITIENNE BEHLEHEME
425 CRESCENT DRIVE
LAKE PARK, FL 33403

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IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: ELISNER CHEVELON DATE: 9/01/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25
Due by September 8, 2004**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

U00000171545
09/03/04-80001-002 61.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BAPTISTE, NERZICHUS 615-FORESTERI DR. LAKE PARK, FL 33403
TITLE NAME STREET ADDRESS CITY-ST-ZIP	YDD FENELUS, MERILES 2557 EVESBROOK RD. WEST PALM BEACH, FL 33407
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEGER, IMELES 551 SABAL PALM DRIVE LAKE PARK, FL 33403
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GENESTAN, EOLRENE 5885 CAYMAN CIR E W. PALM BCH., FL 33407
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S TERALEM, DOMINIQUE 145 SYPRESS DR. LAKE PARK, FL 33403
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE: ELISNER CHEVELON DATE: 9/01/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #