

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Dec 09, 2008
Secretary of State

DOCUMENT# N95000005984

Entity Name: EGLISE BAPTISTE HAITIENNE BETHLEEM, INC.

Current Principal Place of Business:

425 CRESCENT DR
LAKE PARK, FL 33403

New Principal Place of Business:

Current Mailing Address:

425 CRESCENT DR
LAKE PARK, FL 33403

New Mailing Address:

FEI Number: 65-0637177

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHEVELON, ELISNER
729 MAGNOLIA DR
LAKE PARK, FL 33403 US

Name and Address of New Registered Agent:

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: ELISNER CHEVELON

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TR () Delete
Name: BAPTISTE, NERZILUS
Address: 615 FORESTERIA DR.
City-St-Zip: LAKE PARK, FL 33403

Title: T () Delete
Name: FENELUS, MERILES
Address: 15096 97TH RD N
City-St-Zip: WEST PALM BEACH, FL 33412

Title: D () Delete
Name: LEGER, IMELES
Address: 3120 EL CAMINO REAL
City-St-Zip: WEST PALM BEACH, FL 33409

Title: VP () Delete
Name: GENESTAN, EDRENE
Address: 4012 HEATH CIRCLE SOUTH
City-St-Zip: WEST PALM BEACH., FL 33407

Title: D () Delete
Name: TERALEME, DOMINIQUE
Address: 145 CYPRESS DR.
City-St-Zip: LAKE PARK, FL 33403

Title: S () Delete
Name: VILSE, VILNET
Address: 2530 WESTCHESTER DR
City-St-Zip: RIVIERA BEACH, FL 33407

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: ELISNER CHEVELON

Electronic Signature of Signing Officer or Director

P

12/09/2008

Date