2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 17, 2009
Secretary of State

DOCUMENT# N96000000916

Entity Name: EGLISE EVANGELIQUE DE SION, INC.

Current Principal Place of Business:

403 SW 75 WAY
NORTH LAUDERDALE, FL 33068

New Principal Place of Business:

Current Mailing Address:

403 SW 75 WAY
NORTH LAUDERDALE, FL 33068

New Mailing Address:

FEI Number: 65-0693375 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CLEDOR, NOLASQUE PASTOR
403 SW 75 WAY
NORTH LAUDERDALE, FL 33068 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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: CLEDOR, NOLASQUE
Address: 1631 NW 2 AVE .
City-St-Zip: FT LAUDERDALE, FL 33311

Title: D ( ) Delete
Name: CLEDOR, ILIANNA
Address: 1631 NW 2 AVE .
City-St-Zip: FT LAUDERDALE, FL 33311

Title: D ( ) Delete
Name: JEANNOT, ROSE
Address: 1123 NE 6 AVE., #6
City-St-Zip: FT LAUDERDALE, FL

Title: D ( ) Delete
Name: SERGO, LOUIS J
Address: 2820 SOMERSET DR #308
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: D ( ) Delete
Name: MICHELLE, GEORGE
Address: 0080 NW 22 ST .
City-St-Zip: SUNRISE, FL 33313

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
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: NOLASQUE CLEDOR D 02/17/2009

Electronic Signature of Signing Officer or Director — Date