2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2002 8:00 am
Secretary of State
03-24-2002 90048 022 ****61.25

DOCUMENT # N96000002325

1. Entity Name

EGLISE DE DIEU L'HOPITAL PAR LA FOI, INC.

Principal Place of Business	Mailing Address
6832 SILVER STAR ROAD ORLANDO FL 32818	6832 SILVER STAR ROAD ORLANDO FL 32818

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3380875 ☐ Applied For ☑ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PHILIAS, MICHELINE
3075 SILVER STAR ROAD, SUITE 201
ORLANDO FL 32810

7. Name and Address of New Registered Agent

Name Micheline PhiliAS
Street Address (P.O. Box Number is Not Acceptable)
6832 Silver Star Road
City Orlando FL Zip Code 32818

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. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

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

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PHILLAS, MICHELINE 5919 SIR HENRY RD ORLANDO FL 32808	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Revered Philias, Micheline D 6407 Cantela Drive Orlando, Fl. 32818	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AD DONET, MICHEL 12175 ROSE BLVD ORLANDO FL 32839	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TRESURER Yves Ambroise T 13732 Huntwick Dr. Orlando, Fl. 32837	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PHILIAS, NANCY 5919 SI HENRY RD ORLANDO FL 32808	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Germain, NANCY 6833 Crescent Ridge Rd. Orlando, Fl. 32818	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Assistant Pastor D Raoul Charles 6412 moore St. Orlando, Fl. 32818	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Assistance Solange Pierre 1475 Rose Blvd. Orlando, Fl. 32809	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

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: Micheline Philias 2-20-02 407-521-6019
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #