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Feb 11 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N96000004669 (5)**

1. Corporation Name

**L'EGLISE EVANGELIQUE BAPTISTE DE LA COMMUNAUTE H
ATTIENNE, INC.**

Principal Place of Business

Mailing Address

**6524 S.W. 8TH PLACE
NORTH LAUDERDALE FL 33068**

**6524 S.W. 8TH PLACE
NORTH LAUDERDALE FL 33068-2620**



3. Date Incorporated or Qualified
09/05/1996

3a. Date of Last Report
02-02- 1997

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number

65-0702199

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DEROSENEY, JEAN ENOCK
6524 S.W. 8TH PLACE
NORTH LAUDERDALE FL 33068**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '12

TITLE **PD** ☐ DELETE
NAME **DEROSENEY, JEAN ENOCK**
STREET ADDRESS **6524 S.W. 8TH PLACE**
CITY-ST-ZIP **NORTH LAUDERDALE FL 33068**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE **VD** ☐ DELETE
NAME **PIERRE-LOUIS, FORTMIL**
STREET ADDRESS **5001 S.W. 12TH STREET**
CITY-ST-ZIP **MARGATE FL 33068**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE **TD** ☐ DELETE
NAME **ANOR, RENE NORVIUS**
STREET ADDRESS **3920 WOODSIDE DR, APT 1**
CITY-ST-ZIP **CORAL SPRINGS FL 33065**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE **SD** ☐ DELETE
NAME **DUCTAN, ZENAS**
STREET ADDRESS **420 S.W. 62ND AVE**
CITY-ST-ZIP **MARGATE FL 33068**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE
NAME **HILAIRE, JOSEPH YVES**
STREET ADDRESS **961 S.W. 80TH AVE, APT C**
CITY-ST-ZIP **NORTH LAUDERDALE FL 33068**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE
NAME **SAINVIL, ROSITA**
STREET ADDRESS **1721 SW 65TH AVE**
CITY-ST-ZIP **POMPANO BEACH FL 33068**

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

SIGNATURE

7954. 977-2938

CR2E037 (9/96)