## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000005978

FILED Apr 18, 2009 Secretary of State

Entity Name: LA PREMIERE EGLISE EVANGELIQUE BAPTISTE HAITIENNE DE KEY WEST, INC.

Current Pr	incipal Place	of Business:	New Principal Plac	New Principal Place of Business:	
311 U S HI KEY WEST	GHWAY 1 <sup>-</sup> , FL 33040				
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
311 U S HI KEY WEST	GHWAY 1 , FL 33040				
FEI Number:	65-0716958	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and	Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:	
JOSEPH, A 5440 5TH A KEY WEST		US			
The above in the State		submits this statement for the pu	rpose of changing its register	red office or registered agent, or both,	
SIGNATUR	RE:				
	Electror	ic Signature of Registered Ager	nt	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD ( ) JOSEPH, ALEU 5440 5TH AVE KEY WEST, FL		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S ( ) AUGUSTIN, AN 805 SHAVERS KEY WEST, FL	LANE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	T ( ) JOLIS, JOUBEI 6200 THIRD ST KEY WEST, FL	REET #9	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( ) NOEL, ERIC 6500 MALONE' KEY WEST, FL		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( ) LOUIS, JEAN A 1213 14TH STF KEY WEST, FL	REET #141	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( ) LOUIS, JONAS 6500 MALONE' KEY WEST, FL		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: ALEUS JOSEPH PD 04/18/2009