

**NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 07, 2007 8:00 am**  
**Secretary of State**

03-07-2007 90186 001 \*\*\*122.50

**DOCUMENT #** N97000000183 X

1. Entity Name

Eglise Baptiste Haitienne De La Grace, Inc.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

3146 NW 68 Street

Suite, Apt #, etc

1

City & State

Fort Lauderdale, FLORIDA

3. Mailing Address

2201 NW 93rd Avenue

Suite, Apt. #, etc,

City & State

Pembroke Pines, Florida

4. FEI Number

65-0776771

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

Zip  
33309-1206

Country  
USA

Zip  
33024

Country  
USA

**66004200**

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Lucdel L. Harrigan

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

2201 NW 93rd Avenue

City

Pembroke Pines

FL

Zip Code  
33024

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Lucdel L. Harrigan

2/15/2007

Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

**FEE IS \$61.25**  
**Initial or Amended UBR**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
President/CEO/Senior Pastor  
Lucdel L. Harrigan  
2201 NW 93rd Avenue  
Pembroke Pines, Florida 33024

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Corporate Secretary/Trustee/Director  
Cleobert Fluorima  
440 NW 40th Court, Apt No.2  
Fort Lauderdale, Florida 33309

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Vice President/Trustee/Director  
Jean Pierre  
2300 SW 43rd Avenue  
Plantation, Florida 33371

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Board Advisory/Ex-officio  
Clifton H. Rodriguez, MPA, CPA, CIA  
3146 NW 68th Street, Suite No.1  
Fort Lauderdale, Florida 33309-1206

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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11.

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**DO NOT WRITE  
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Lucdel L. Harrigan, CEO

2/15/2007  
Date

(954)554-6844  
Daytime Phone #