2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002677

FILED May 01, 2006 Secretary of State

Entity Name: HOMESTEAD HAITIAN CHURCH OF THE NAZARENE, INC.

US

Current Principal Place of Business: New Principal Place of Business:

24801 SW 134TH AVE PRINCETON, FL 33032

Current Mailing Address: New Mailing Address:

152 NW 17TH ST 12321 SW 252 TER

HOMESTEAD, FL 33030 US HOMESTEAD, FL 33032 US

FEI Number: 65-0798941 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DORSAINVIL, ERNSO
DORSAINVIL, ERNSO
152 NW 17TH STREET
12321 SW 252 TER

HOMESTEAD, FL 33030 US HOMESTEAD, FL 33033 US

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: ERNSO DORSAINVIL 05/01/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P () Delete Title: P (X) Change () Addition

 Name:
 DORSAINVIL, ERNSO
 Name:
 DORSAINVIL, ERNSO

 Address:
 152 NW 17TH STREET
 Address:
 12321 SW 252 TER

 City-St-Zip:
 HOMESTEAD, FL 33030
 City-St-Zip:
 HOMESTEAD, FL 33032

Title: V () Delete Title: () Change () Addition

 Name:
 VALBRUN, DARIO
 Name:

 Address:
 29905 SW 152 CT.
 Address:

 City-St-Zip:
 LEISURE CITY, FL 33033
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 VERELUS, CHÂRLES
 Name:

 Address:
 772 NE 11 ST
 Address:

 City-St-Zip:
 HOMESTEAD, FL 33030
 City-St-Zip:

Title: T () Delete Title: () Change () Addition

 Name:
 ST LUC, EMMANUEL
 Name:

 Address:
 121 REDLAND ROAD #101
 Address:

 City-St-Zip:
 HOMESTEAD, FL 33034
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ERNSO DORSAINVIL P 05/01/2006