

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000004492

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Entity Name:** BETHEL HAITIAN BAPTIST CHURCH, INC.

**Current Principal Place of Business:**

4293 NW 167TH STREET  
MIAMI GARDENS, FL 33055

**New Principal Place of Business:**

**Current Mailing Address:**

4293 NW 167TH STREET  
MIAMI GARDENS, FL 33055

**New Mailing Address:**

**FEI Number:** 65-0452241

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHARLEMAGNE, LUCIEN  
20002 NW 43RD CT  
MIAMI GARDENS, FL 33055 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: T  
Name: WASHINGTON, NORMAN  
Address: 1885 NW 113 TERR  
City-St-Zip: MIAMI, FL 33167

Title: S  
Name: VANCOL, JEAN S  
Address: 190 NW 87TH STREET  
City-St-Zip: ER PORTAL, FL 33150

Title: D  
Name: CHARLEMAGNE, MICHEL  
Address: 610 SEA TURTLE WAY  
City-St-Zip: PLANTATION, FL 33324

Title: C  
Name: CHARLEMAGNE, LUCIEN  
Address: 20002 NW 43RD COURT  
City-St-Zip: MIAMI GARDENS, FL 33055

I hereby 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 all other like empowered.

SIGNATURE: LUCIEN CHARLEMAGNE

C

04/30/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date