2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004255

FILED Mar 29, 2009 Secretary of State

Entity Name: EGLISE BAPTISTE IMMANUEL DES FRERES UNIS, INC.

Sufferit	rincipal Place	of Business:	New Principal Pla	New Principal Place of Business:	
	SET TRIP HILL, FL 33313				
Current Mailing Address:			New Mailing Addr	New Mailing Address:	
	SET TRIP HILL, FL 33313				
FEI Number	: 65-1020507	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	d Address of C	Current Registered Agent:	Name and Addres	s of New Registered Agent:	
4044 INÝE	ROBERT REV ERRORY DR. HILL, FL 33319	US			
	e named entity s e of Florida.	submits this statement for the	purpose of changing its registe	ered office or registered agent, or both,	
SIGNATU	RE:				
	Electron	ic Signature of Registered A	gent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Fitle: Name: Address: City-St-Zip:	PIERRE, DANIE 4174 INVERRO		Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address:			Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	VP () DREURESTIL, 4191 NW 21ST LAUDERHILL, F	NICOL FL 33313 Delete NEL	Name: Address:	() Change () Addition () Change () Addition	
Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: Address:	VP () DREURESTIL, I 4191 NW 21ST LAUDERHILL, I T () CHERY, MISRA 1784 NE 3 AVE POMBANO BEA	NICOL FL 33313 Delete NEL ACH, FL 33304 Delete SEPH J. 75 CT	Name: Address: City-St-Zip: Title: Name: Address:		
Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address:	VP () DREURESTIL, 14191 NW 21ST LAUDERHILL, F T () CHERY, MISRA 1784 NE 3 AVE POMBANO BEA TA () ANSELME, JOS 9813 NORTH W TAMARAC, FL	NICOL FL 33313 Delete NEL ACH, FL 33304 Delete SEPH W 75 CT 33321 Delete NLD RRY CT	Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	()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: ROBERT CHERY REV. 03/29/2009