

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005729

FILED  
Apr 14, 2008  
Secretary of State

**Entity Name:** FIRST HAITIAN BAPTIST CHURCH OF KISSIMMEE, FLORIDA, INC.

**Current Principal Place of Business:**

900 S. THACKER AV.  
KISSIMMEE, FL 34741 US

**New Principal Place of Business:**

**Current Mailing Address:**

900 S. THACKER AV.  
KISSIMMEE, FL 34741 US

**New Mailing Address:**

P.O BOX 421830  
KISSIMMEE, FL 34742 US

**FEI Number:** 59-3611098

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRINSON, EDWARD  
1201 W. EMMETT ST.  
KISSIMMEE, FL 34741 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: D ( ) Delete  
Name: LUBIN, LOUIS W  
Address: 900 S THACKER AV.  
City-St-Zip: KISSIMMEE, FL 34741

Title: T ( ) Delete  
Name: MOREAU, SULLY  
Address: 900 S THACKER AV.  
City-St-Zip: KISSIMMEE, FL 34741

Title: T ( ) Delete  
Name: WESNER, JUSTE  
Address: 900 S THACKER AV.  
City-St-Zip: KISSIMMEE, FL 34741

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: LUBIN, LOUIS W  
Address: 256 CHADWORTH DR  
City-St-Zip: KISSIMMEE, FL 34758

Title: T (X) Change ( ) Addition  
Name: MOREAU, SULLY  
Address: 5457 ARPANA DR.  
City-St-Zip: ORLANDO, FL 32809

Title: T (X) Change ( ) Addition  
Name: WESNER, JUSTE  
Address: 191 CITRUS DR.  
City-St-Zip: KISSIMMEE, FL 34743

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: REV. LOUIS W. LUBIN

PAST

04/14/2008

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

\_\_\_\_\_  
Date