

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006872

FILED
Jan 17, 2009
Secretary of State

Entity Name: EGLISE EVANGELIQUE BAPTISTE DE NAZARETH, INC.

Current Principal Place of Business:

1551 NW 47 AVE
FORT LAUDERDALE, FL 33313

New Principal Place of Business:

Current Mailing Address:

1551 NW 47 AVE
FORT LAUDERDALE, FL 33313

New Mailing Address:

FEI Number: 65-0961612

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANTOINE, ANTOINE M
6270 NW 13 ST
SUNRISE, FL 33313 US

Name and Address of New Registered Agent:

JEAN-PIERRE, MICHEL
301 NE 43 STREET
OAKLAND PARK, FL 33304 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: MICHEL JEAN-PIERRE

01/17/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: JEAN FRANCOIS, THOMAS
Address: 1101 TENNESSEE AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: TD () Delete
Name: JEAN PIERRE, MICHEL
Address: 301 NE 43 STREET
City-St-Zip: OAKLAND PARK, FL 33304

Title: TD () Delete
Name: DESRAVINES, WILLIAM
Address: 1172 TENNESSEE AVE
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: D () Delete
Name: EUGENE, JOSELYN
Address: 1610 NW 2 AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33311

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: ILARION, BORGELA
Address: 4230 NW 32 TERRACE
City-St-Zip: LAUDERDALE LAKES, FL 33309

Title: TD (X) Change () Addition
Name: DESRAVINES, WILLIAM
Address: 7943 PICKLEWOOD PARK DRIVE
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D (X) Change () Addition
Name: EUGENE, JOCELYN
Address: 1610 NW 2 AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33311

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: WILLIAM DESRAVINES

DEAC

01/17/2009

Electronic Signature of Signing Officer or Director

Date