

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009264

Entity Name: BRAZILIAN FREE METHODIST CHURCH OF WEST PALM BEACH, INC.**FILED**
Apr 30, 2015
Secretary of State
CC0552885881**Current Principal Place of Business:**2101 NW 33RD
SUITE 2000-A
POMPANO BEACH, FL 33066**Current Mailing Address:**P.O. BOX 670491
CORAL SPRINGS, FL 33066**FEI Number: 20-0974654****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**OLIVEIRA, JOSEPH R
2659 CARAMBOLA CIRCLE NORTH
401
COCONUT CREEK, FL 33066 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: JOSEPH ROBERTO OLIVEIRA****04/30/2015**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	OLIVEIRA, JOSEPH R
Address	2659 CARAMBOLA CIRCLE NORTH 401
City-State-Zip:	COCONUT CREEK FL 33066

Title	PASTOR
Name	OLIVEIRA, DALZIRA B
Address	2659 CARAMBOLA CIRCLE NORTH 401
City-State-Zip:	COCONUT CREEK FL 33066

Title	SECRETARY
Name	CAMARGO, TATIANA
Address	3440 W HILLSBORO BLVD 104
City-State-Zip:	COCONUT CREEK FL 33073

Title	TREASURER
Name	CAMARGO, PAULO
Address	3440, W HILLSBORO BLVD 104
City-State-Zip:	CORAL SPRINGS FL 33073

Title	OTHER
Name	ZACHARCZUK, DANIELA
Address	290, 174ST 1916
City-State-Zip:	SUNNY ISLES BEACH FL 33160

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: JOSEPH ROBERTO OLIVEIRA**PRESIDENT****04/30/2015**

Electronic Signature of Signing Officer/Director Detail

Date