

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000009232

**Entity Name:** EGLISE EVANGELIQUE BAPTISTE BETHLEHEM WESTSIDE OF JACKSONVILLE, FLORIDA, INC.

**FILED**  
**Mar 08, 2017**  
**Secretary of State**  
**CC5975421172**

**Current Principal Place of Business:**

4565 RICKER RD  
JACKSONVILLE, FL 32210

**Current Mailing Address:**

2502 BETSY DR  
JACKSONVILLE, FL 32210

**FEI Number: 26-1135730**

**Certificate of Status Desired: No**

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

CHERICHEL, BERNARD  
2052 BETSY DRIVE  
JACKSONVILLE, FL 32210 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name CHERICHEL, BERNARD  
Address 2052 BETSY DRIVE  
City-State-Zip: JACKSONVILLE FL 32210

Title VD  
Name MAXIME, DESILIE  
Address 1460 MORGANA RD  
City-State-Zip: JACKSONVILLE FL 32211

Title SD  
Name CHERICHEL, ELIZANNE  
Address 2052 BETSY DRIVE  
City-State-Zip: JACKSONVILLE FL 32210

Title TD  
Name HOMME TILUS, JESUS  
Address 6520 CRIMSON LEAF LANE  
City-State-Zip: JACKSONVILLE FL 32244

Title SD  
Name CHERICHEL, BELINE  
Address 2052 BETSY DRIVE  
City-State-Zip: JACKSONVILLE FL 32210

*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: BERNARD CHERICHEL**

**MR.**

**03/08/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date