

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000012354

**Entity Name:** MESSENGER POUR CHRIST, INC.

**Current Principal Place of Business:**

630 WEST 4TH ST  
APT 5402  
JACKSONVILLE, FL 32209

**Current Mailing Address:**

630 WEST 4TH ST  
5402  
JACKSONVILLE, FL 32209

**FEI Number:** 90-0341679

**Certificate of Status Desired:** No

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

ORELUS, FRANCOIS  
630 WEST 4TH ST  
5402  
JACKSONVILLE, FL 32209 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 RA  
Name ORELUS, FRANCOIS  
Address 630 WEST 4TH ST APT 5402  
City-State-Zip: JACKSONVILLE FL 32209

Title D  
Name ORELUS, EMANUEL  
Address 630 WEST 4TH ST APT 5402  
City-State-Zip: JACKSONVILLE FL 32209

Title D  
Name MICHEL, CLOVIS  
Address 6519 AVA DR.  
City-State-Zip: JACKSONVILLE FL 32211

Title D  
Name TILUS, JESUS  
Address 6519 AVA DR.  
City-State-Zip: JACKSONVILLE FL 32211

*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:** FRANCOIS ORELUS

RA

03/01/2021

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

\_\_\_\_\_  
Date