

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000004674

**Entity Name:** EGLISE EVANGELIQUE BAPTISTE DE GALILEE, INC.

**Current Principal Place of Business:**

18340 NE 2ND AVE.  
MIAMI, FL 33169

**Current Mailing Address:**

18340 NE 2ND AVE.  
MIAMI, FL 33169

**FEI Number: 90-0499740**

**Certificate of Status Desired: Yes**

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

LEVEILLE, RIGOBERT W  
3301 SW 179TH AVE.  
MIRAMAR, FL 33029 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 LEVEILLE, RIGOBERT W  
Address 3301 SW 179TH AVE.  
City-State-Zip: MIAMI GARDEN FL 33169

Title SEC  
Name THESIER, NATHALIE  
Address 353 NE 160 TER.  
City-State-Zip: N. MIAMI FL 33162

Title A-S  
Name LEVEILLE, KIMBERLY C  
Address 3301 SW 179TH AVE  
City-State-Zip: MIRAMAR FL 33029

Title A-S  
Name ARGILAGOS, RUBENS  
Address 20435 NW 8TH COURT  
City-State-Zip: MIAMI FL 33169

Title TRES  
Name ANTOINE, LURANISE  
Address 181 NE YVES DAIRY RD APT D401  
City-State-Zip: MIAMI FL 33162

Title A-T  
Name EDMOND, BERNARD  
Address 1461 NE 131ST STREET  
City-State-Zip: MIAMI FL 33161

*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: RIGOBERT W. LEVEILLE**

**PRESIDENT**

**04/29/2013**

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

\_\_\_\_\_  
Date