

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000007087

**Entity Name:** HAITIAN CHURCH OF GOD OF PALM COAST INC

**Current Principal Place of Business:**

1312 SOTUH STATE STREET  
BUNNELL, FL 32110

**Current Mailing Address:**

1312 SOTUH STATE STREET  
BUNNELL, FL 32110 US

**FEI Number:** 45-4323534

**Certificate of Status Desired:** No

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

JEANGILLES, WILBERT SR  
24 REINHARDT LN  
PALM COAST, FL 32164 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 PAST  
Name JEANGILLES, WILBERT SR  
Address 24 REINHARDT LN  
City-State-Zip: PALM COAST FL 32164

Title MGR  
Name EXANTUS, HEROLD J  
Address 10 RAINMILL PL  
City-State-Zip: PALM COAST FL 32164

Title D  
Name JOSIL, NATHALIE  
Address 5 PONY EXPRESS DRIVE  
City-State-Zip: PALM COAST FL 32164

Title D  
Name HENRY, SAINTSOIR  
Address 7 PEBBLESTONE LN  
City-State-Zip: PALM COAST FL 32164

Title D  
Name DERILUS, MARIE A  
Address 24 REINHARDT LANE  
City-State-Zip: PALM COAST FL 32164

Title D  
Name VENANTE, FRANCOIS  
Address 5 PONY EXPRESS DR  
City-State-Zip: PALM COAST FL 32164

*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:** JEANGILLES WILBERT

**PASTOR**

**04/30/2022**

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

\_\_\_\_\_  
Date