

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000000675

Entity Name: EGLISE BAPTISTE PHILADELPHIE D'OCALA INC**Current Principal Place of Business:**1240 HWY 484
UNIT C
OCALA, FL 34480**Current Mailing Address:**1240 HWY 484
UNIT C
OCALA, FL 34480 M**FEI Number:** 01-0943629**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DORVILUS, JEAN J
11667 NW 52 TERRACE
OCALA, FL 34476 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:** DORVILUS JEAN J

06/20/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	T
Name	FLORVILUS, JOANEL
Address	9312 SW 129TH TERENCE RD
City-State-Zip:	DUNELLON FL 34432
Title	VP
Name	THEARD, LEONEL
Address	2716 NW 18TH AVE
City-State-Zip:	OCALA FL 34475
Title	ASST. SECRETARY
Name	PERCINTHE, ERMINE
Address	129 DOG WOOD DRIVE CIRCLE
City-State-Zip:	OCAL FL 34472
Title	DIRECTOR
Name	JOASIL, JOSEPH F
Address	2580 SW 146TH PL ROAD
City-State-Zip:	OCALA FL 34473

Title	P
Name	DORVILUS, JEAN JACKSON
Address	11667 NW 52 TERRACE
City-State-Zip:	OCALA FL 34476
Title	SECRETARY
Name	VALCIUS, HUGUES
Address	2839 SW 162 PL
City-State-Zip:	OCALA FL 34473
Title	ASST. TREASURER
Name	PIERRE-CHARLES, JOCELYN
Address	6900 SW 137TH CT WOOD
City-State-Zip:	OCALA FL 34481

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: JOANEL FLORVILUS

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06/20/2020

Electronic Signature of Signing Officer/Director Detail

Date