

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000002459

**Entity Name:** L'EGLISE PRIMITIVE DE LA RENAISSANCE INC**Current Principal Place of Business:**150 W MICHIGAN ST  
D  
ORLANDO, FL 32806**Current Mailing Address:**P.O BOX 550217  
ORLANDO, FL 32855 US**FEI Number: 80-0558044****Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BRUNACHE, ELSA  
5247 LIGHTHOUSE RD  
ORLANDO, FL 32808 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	P
Name	RIGAUDON, NICOLAS
Address	1057 S KIRKMAN RD APT 234
City-State-Zip:	ORLANDO FL 32839

Title	DEACON
Name	JEAN-JACQUES, REGINALD
Address	20010 CHIVE ST
City-State-Zip:	ORLANDO FL 32837

Title	EXECUTIVE ADMINISTRATOR
Name	BRUNACHE, ELSA
Address	P.O BOX 551442
City-State-Zip:	ORLANDO FL 32855

Title	ASST. TREASURER
Name	LEGER, MARIE
Address	5415 TIMBER CHASE CT
City-State-Zip:	ORLANDO FL 32839

Title	OFFICER
Name	EUGENE, RICHARDSON
Address	608 OAKFORD WAY, ORLANDO
City-State-Zip:	ORLANDO FL 32811

Title	PASTOR
Name	CHARLES, HERNICE
Address	7851 SAGEBRUSH PL
City-State-Zip:	ORLANDO FL 32822

Title	SECRETARY
Name	ALADIN, ELISENA
Address	5501 PGA BLVD
City-State-Zip:	ORLANDO FL 32809

Title	TREASURER
Name	LAPOINTE, FILDOR
Address	5309 ROSEGAY CT
City-State-Zip:	ORLANDO FL 32811

**Continues on page 2**

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: ELSA BRUNACHE****EXECUTIVE ADMIN****04/30/2015**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title ASST. SECRETARY  
Name JULMIS, ALEX  
Address 6745 MERITMOOR CIR  
City-State-Zip: ORLANDO FL 32818

Title OFFICER  
Name PINTHIERE, SOREL  
Address 150 W MICHIGAN ST  
UNIT D  
City-State-Zip: ORLANDO FL 32806