

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000002174

Entity Name: SALEM ADVENT CHURCH INC.**Current Principal Place of Business:**5386 SYLVER STAR RAOD
ORLANDO, FL 32808**Current Mailing Address:**P.O. BOX 682338
ORLANDO, FL 32868**FEI Number:** 45-4647919**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ALEXANDRE, ANTOINE
1873 SCRUB JAY RD
ORLANDO, FL 32703 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	ALEXANDRE, ANTOINE
Address	1873 SCRUB JAY RD
City-State-Zip:	APOPKA FL 32703

Title	TRES
Name	LOUISSAINT, ELIUS
Address	2709 SHEARWATER ST.
City-State-Zip:	CLERMONT FL 32711

Title	SEC
Name	FABIOLA, JUSTE
Address	P.O. 682338
City-State-Zip:	ORLANDO FL 32868

Title	ASSIST. TRES
Name	DELMA, FONTENELLE
Address	2001 MANHATTAN LN.
City-State-Zip:	CASSELBERRY FL 32707

Title	VP
Name	SYLVEUS, HERALD
Address	7404 WOODHILL PARK DRIVE APT. 1320
City-State-Zip:	ORLANDO FL 32818

Title	ASST
Name	NEREUS, ANTOINE
Address	2430 WINCHESTER BLVD
City-State-Zip:	APOPKA FL 34743

Title	COUN
Name	CHARLES, PAST. MAX E
Address	908 SOUTHERN OAK LANE
City-State-Zip:	APOPKA FL 32712

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: ANTOINE ALEXANDRE**PRESIDENT****03/18/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date