

**2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000002666

**Entity Name:** FOLLOWERS OF CHRIST, INC**Current Principal Place of Business:**6491 WETLAND DR  
LAKE WORTH, FL 33467**Current Mailing Address:**6491 WETLAND DR  
LAKE WORTH, FL 33467 US**FEI Number:** 45-5118649**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ULYSSE, HENOC  
6491 WETLAND DR  
LAKE WORTH, FL 33467 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	CEO
Name	ULYSSE, REGGIE BRENTSEN
Address	6491 WETLAND DR
City-State-Zip:	LAKE WORTH FL 33467

Title	VP
Name	ADELSON, JEAN GETEAU
Address	723 AVENUE CHAUMONT
City-State-Zip:	DELRAY BEACH FL 33445

Title	TREASURER
Name	ULYSSE, HENOC
Address	6491 WETLAND DRIVE
City-State-Zip:	LAKE WORTH FL 33467-7241

Title	PRESIDENT
Name	ULYSSE, EMANISE
Address	6491 WETLAND DR
City-State-Zip:	LAKE WORTH FL 33467

Title	S
Name	CADET, SAUVIENNE
Address	9023 SILVER GLEN WAY
City-State-Zip:	LAKE WORTH FL 33467

Title	MEMBER AT LARGE
Name	ARISTYLD, SELITA
Address	2201 NW 41 AVE 110
City-State-Zip:	LAUDERHILL FL 33313

*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: HENOC ULYSSE****TREASURER****03/18/2025**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date