

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000007820

**Entity Name:** PIERRE ANGULAIRE BAPTIST CHURCH INC

**Current Principal Place of Business:**

1033 SW BILTMORE STREET  
PORT ST LUCIE, FL 34983

**Current Mailing Address:**

1033 SW BILTMORE STREET  
PORT ST LUCIE, FL 34983 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

ROMULUS, ISAAC  
1125 SW COLEMAN AVE  
PORT SAINT LUCIE, FL 34953 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 ROMULUS, ISAAC  
Address 1125 SW COLEMAN AVE  
City-State-Zip: PORT ST LUCIE FL 34953

Title VP  
Name CELICOURT, ANDRE  
Address 904 CORAL STREET  
City-State-Zip: FORT PIERCE FL 34982

Title TRES  
Name DUBREUS, DULAS  
Address 3305 SW MARTIN ST  
City-State-Zip: PORT ST LUCIE FL 34953

Title DIR  
Name TERILUS, FREDERIC  
Address 1541 SW FLAGAMI RD  
City-State-Zip: PORT ST LUCIE FL 34953

*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:** DULAS DUBREUS

01/18/2017

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

\_\_\_\_\_ Date