

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000010950

Entity Name: EGLISE CHRETIENNE DE LA PORTE ETROITE INC.**Current Principal Place of Business:**2964 S JOG ROAD
GREENACRES, FL 33467**Current Mailing Address:**2964 S JOG ROAD
GREENACRES, FL 33467**FEI Number: 81-4432716****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PIERRE, WILLY
415 SOUTH 12 ST
LANTANA, FL 33462 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:** WILLY PIERRE

05/12/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name CAMILLE, RODRIGUE
Address 5726 LINCOLN CIRCLE EAST
City-State-Zip: LAKEWORTH FL 33463

Title PASTOR
Name PIERRE , WILLY
Address 415 S 12 ST
City-State-Zip: LANTANA FL 33462

Title S
Name LAROSE, WESLY
Address 306 E GATEWAY BLVD
City-State-Zip: BOYNTON BEACH FL 33435

Title TREASURER
Name PIERRE, WILTHER
Address 7206 PINE BLUFF DRIVE
City-State-Zip: LAKEWORTH FL 33467

Title ASST. SECRETARY
Name BRICEAU, JEAN ILRICK
Address 3337 COMMODORE CT
City-State-Zip: WEST PALM BEACH FL 33411

Title O
Name GERTIN, YVENIE DESTIN
Address 6623 WINDMILL WAY
City-State-Zip: WEST PALM BEACH FL 33413

Title OFFICER
Name LOUIDORT, KESHNER
Address 4859 CONCORDIA LN
City-State-Zip: BOYNTON BEACH FL 33436

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: WILLY PIERRE

PASTOR

05/12/2020

Electronic Signature of Signing Officer/Director Detail

Date