

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N20000006287

**Entity Name:** EGLISE BAPTISTE KEDESH HAITIENNE D'ORLANDO ,INC

**Current Principal Place of Business:**

3311 NORTH POWER DRIVE  
ORLANDO, FL 32818

**Current Mailing Address:**

P.O BOX 680021  
ORLANDO, FL 32868 US

**FEI Number: 85-2314533**

**Certificate of Status Desired: Yes**

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

SURIN, JEAN CLAUDE  
2766 PLUMBERRY AVE  
OCOEE, FL 34761 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 PASTOR  
Name PASTEUR, RONALD REV  
Address 7244 WOODHILL PARK DRIVE  
City-State-Zip: ORLANDO FL 32818

Title VP  
Name GASPARD, NICOLLE  
Address 1797 MADISON IVY CIRCLE  
City-State-Zip: APOPKA FL 32712

Title SE  
Name LISSADE, JEAN MARIE LEO  
Address 2759 TALL MAPLE LOOP  
City-State-Zip: OCOEE FL 34761

Title CFO  
Name DEBREUS, DOMINIQUE  
Address 636 GLENVIEW DR  
City-State-Zip: WINTER GARDEN FL 34787

Title DEACON  
Name JACOB, JONEL  
Address 6424 LONG BREEZE RD  
City-State-Zip: ORLANDO FL 32810

*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: RONALD PASTEUR**

**PASTOR**

**03/24/2023**

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

\_\_\_\_\_  
Date