

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000001555

**Entity Name:** EGLISE BAPTISTE DE LA RECONCILIATION, INC.**Current Principal Place of Business:**1870 N STATE ROAD 7  
MARGATE, FL 33063**Current Mailing Address:**1870 N STATE ROAD 7  
MARGATE, FL 33063**FEI Number:** 65-0365296**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JEAN LOUIS , FRANTZ DR.  
1870 NORTH STATE ROAD 7  
MARGATE, FL 33063 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:** FRANTZ JEAN LOUIS

03/23/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                        |
|-----------------|------------------------|
| Title           | PRESIDENT              |
| Name            | JEAN-LOUIS, FRANTZ DR. |
| Address         | 5290 S.W. 8TH STREET   |
| City-State-Zip: | MARGATE FL 33068       |

|                 |                       |
|-----------------|-----------------------|
| Title           | DEACON                |
| Name            | ALCIRA, LEONCE DEACON |
| Address         | 6006 CORAL GATE BLD 5 |
| City-State-Zip: | MARGATE FL 33063      |

|                 |                          |
|-----------------|--------------------------|
| Title           | TREASURER                |
| Name            | PIERRE, JULINE TREASURER |
| Address         | 11711 NORTH WEST 1ST     |
| City-State-Zip: | CORAL SPRINGS FL 33071   |

|                 |                             |
|-----------------|-----------------------------|
| Title           | CORRESPONDING SECRETARY     |
| Name            | JEAN-LOUIS, MARIE COUNSELOR |
| Address         | 5290 S.W. 8TH STREET        |
| City-State-Zip: | MARGATE FL 33068            |

|                 |                             |
|-----------------|-----------------------------|
| Title           | S                           |
| Name            | SEME, GINA SECTRETARY       |
| Address         | 275 SW 56 TH AVE<br>APT 104 |
| City-State-Zip: | MARGATE FL 33068            |

|                 |                             |
|-----------------|-----------------------------|
| Title           | DEACON                      |
| Name            | CEME, CLAUDE COUNSELOR      |
| Address         | 275 SW 56 TH AVE<br>APT 104 |
| City-State-Zip: | MARGATE FL 33068            |

*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:** FRANTZ JEAN-LOUIS

PRESIDENT

03/23/2021

Electronic Signature of Signing Officer/Director Detail

Date