# 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.

PD

SIGNATURE: FRANCIEUSE F DUCLAIR

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: Yes Name and Address of Current Registered Agent:

DUCLAIR, FRANCIEUSE F 5121 NW 2ND AVENUE MIAMI, FL 33127 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

#### **Officer/Director Detail :**

Title	PD	Title	VD
Name	DUCLAIR, FRANCIEUSE F	Name	FIDELE, WOODYNN
Address	5121 NW 2ND AVENUE	Address	5121 NW 2ND AVENUE
City-State-Zip:	MIAMI FL 33127	City-State-Zip:	MIAMI FL 33127
Title	SD		
THE	30		
Name	ORELUS, MARIE I		
Address	5121 NW 2ND AVENUE		
City-State-Zip:	MIAMI FL 33127		

# 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT# N9700005037

Entity Name: HAITIAN CHURCH OF GOD SANCTIFIED, INC.

# **Current Principal Place of Business:**

5121 NW 2ND AVENUE MIAMI, FL 33127

# **Current Mailing Address:**

5224 N MIAMI AVE MIAMI. FL 33127 US

# FEI Number: 65-0793117

FILED Mar 23, 2018 Secretary of State CC3467159105

> 03/23/2018 Date

Date