## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005041

Entity Name: EVANGELICAL UNION OF FISHERMEN, INC.

#### Current Principal Place of Business:

3542 SW VINCENNES ST PORT-ST LUCIE, FL 34953

## **Current Mailing Address:**

3542 SW VINCENNES ST PORT- ST LUCIE, FL 34953

# FEI Number: NOT APPLICABLE

## Name and Address of Current Registered Agent:

DERILUS, OSIAS REV. 3555 HARLOWE AVENUE BOYNTON BEACH, FL 33436 US Certificate of Status Desired: Yes

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	SECRETARY
Name	PROVIDENCE, PROVIDE	Name	JOSEPH, MARIE F
Address	3542 SW VINCENNES ST	Address	512 SW DUXBURY AVE
City-State-Zip:	PORT-ST LUCIE FL 34953	City-State-Zip:	PORT SAINT LUCIE FL 34983
Title	D	Title	TREASURER
Name	PROVIDENCE, BETTY	Name	PAUL-HENRY, MARIE L
Address	3542 SW VINCENNES ST	Address	721 TREEMONT AVE
City-State-Zip:	PORT SAINT LUCIE FL 34953	City-State-Zip:	PSL FL 34983
Title	DIRECTOR		
Name	ALEXANDRE, CENEVY		
Address	611 SW SARAGOSSA AVE		
City-State-Zip:	PORT SAINT-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: PROVIDE PROVIDENCE

PRESIDENT

04/26/2017

Electronic Signature of Signing Officer/Director Detail

Date

# FILED Apr 26, 2017 Secretary of State CC4849201524

Date