## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003164

Entity Name: EVANGELICAL CHURCH OF RECONCILIATION INC.

**FILED** Apr 09, 2018 **Secretary of State** CC8171539294

## **Current Principal Place of Business:**

495 NW 191 ST 2ND FLOOR MIAMI, FL 33169

## **Current Mailing Address:**

495 NW 191 ST 2ND FLOOR MIAMI, FL 33169

FEI Number: 01-0675850 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

BELHOMME, VITER-LOUIS P 4901 SW 23RD STREET WEST PARK, FL 33023 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 **SDIR** Title

BELHOMME, PHANUEL SDR PHAURESTAL, JACQUELINE T Name Name

Address 4901 SW 23RD STREET Address 18940 NW 27TH AVE

APT. # 204

City-State-Zip: WSET PARK FL 33023 MIAMI GARDENS FL 33056 City-State-Zip:

Title ST

202

Title Name GENOIS, JEAN BATHELMY

Name BELHOMME, CARLINE Address 7400 STIRLING ROAD 4901 SW 23RD STREET Address 132

City-State-Zip: WEST PARK FL 33023 HOLLYWOOD FL 33024 City-State-Zip:

Title WMD Title ΥM

CLERGER, MARIE CARMELLE DR. Name DINETTE, JOSEPH Name

7400 STIRLING ROAD Address Address 13100 NE 7TH AVE

APT. # 132

City-State-Zip: HOLLYWOOD FL 33024 MIAMI FL 33161 City-State-Zip:

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.

Date