

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Dec 09, 2009**  
**Secretary of State**

DOCUMENT# N00000008036

**Entity Name:** HAITIAN NEIGHBORHOOD CENTER SANT LA, INC.**Current Principal Place of Business:**5000 BISCAYNE BLVD.  
SUITE 110  
MIAMI, FL 33137**New Principal Place of Business:****Current Mailing Address:**5000 BISCAYNE BLVD.  
SUITE 110  
MIAMI, FL 33137**New Mailing Address:****FEI Number:** 65-1080680**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**METELLUS, GEPSIE M E.D.  
5000 BISCAYNE BOULEVARD, SUITE 110  
SUITE 110  
MIAMI, FL 33137 US**Name and Address of New Registered Agent:**

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**OFFICERS AND DIRECTORS:****Title:** BOC ( ) Delete  
**Name:** EUGENE, THOMAS  
**Address:** 7300 N. KENDALL DRIVE  
**City-St-Zip:** MIAMI, FL 33137**Title:** BOT ( ) Delete  
**Name:** O'ROURKE, MICHAEL  
**Address:** 401 LAS OLAS  
**City-St-Zip:** FORT LAUDERDALE, FL 33137**Title:** BOS ( ) Delete  
**Name:** TOUSSAINT, MARIE JO  
**Address:** 1350 NW 12 AVENUE  
**City-St-Zip:** MIAMI, FL 33137**Title:** BOVC ( ) Delete  
**Name:** RENAZILE, JEAN  
**Address:** 13385 SW 28TH STREET  
**City-St-Zip:** MIRAMAR, FL 33137**Title:** BD ( ) Delete  
**Name:** OLIVIER, FRANTZ ESQ  
**Address:** 777 NE 79TH STREET, SUITE 104  
**City-St-Zip:** MIAMI, FL 33137**Title:** BD ( ) Delete  
**Name:** VODICKA, CHARLES H  
**Address:** 9500 S DADELAND BLVD  
**City-St-Zip:** MIAMI, FL 33137**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** BOT (X) Change ( ) Addition  
**Name:** PIERRE, GUY  
**Address:** 12655 NE 6TH AVENUE  
**City-St-Zip:** NORTH MIAMI, FL 33161**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** BD (X) Change ( ) Addition  
**Name:** ELLISON, JIM  
**Address:** 4974 SW 76 STREET  
**City-St-Zip:** MIAMI, FL 33143**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GEPSIE M. METELLUS

ED

12/09/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director\_\_\_\_\_  
Date