

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000002994

FILED
Oct 07, 2006
Secretary of State

Entity Name: HAITIAN-AMERICAN ORGANIZATION FOR POPULATION ACTIVITIES AND EDUCATION, INC.

Current Principal Place of Business:

8700 N. 50TH STREET, APT. 1435
TAMPA, FL 33617

New Principal Place of Business:

4202 N. 22ND STREET
TAMPA, FL 33610

Current Mailing Address:

8700 N. 50TH STREET, APT. 1435
TAMPA, FL 33617

New Mailing Address:

P.O. BOX 311168
TAMPA, FL 33680

FEI Number: 20-0899620 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

JEAN-FRANCOIS, EMMANUEL
8700 N. 50TH STREET, APT. 1435
TAMPA, FL, FL 33617 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: EMMANUEL JEAN FRANCOIS

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JEAN-FRANCOIS, EMMANUEL
Address: 8700 N. 50TH STREET, APT. 1435
City-St-Zip: TAMPA, FL 33617

Title: V (X) Delete
Name: JOSEPH, FRANKLIN
Address: 1410 MARATHON K. DR., APT. 206
City-St-Zip: TAMPA, FL 33604

Title: S () Delete
Name: LEGROS, MARJORIE
Address: 3044 SUNWATCH DR.
City-St-Zip: WESTLY CHAPEL, FL 33543

Title: S () Delete
Name: EDOUARD, LAMOTH
Address: 4004 S. MANHATTAN AVE., APT.11
City-St-Zip: TAMPA, FL 33611

Title: T () Delete
Name: APPO, RENALD
Address: 3044 SUNWATCH DR.
City-St-Zip: WESTLY CHAPEL, FL 33543

Title: O () Delete
Name: FOUCAULT, PIERRETTE
Address: 8700 N. 50TH STREET, APT. 1435
City-St-Zip: TAMPA, FL 33617

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: MACEUS, LEOMENE
Address: 2603 WILSKY RD.
City-St-Zip: TAMPA, FL 33639

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: EMMANUEL JEAN FRANCOIS

Electronic Signature of Signing Officer or Director

P

10/07/2006

Date