

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012525

FILED
Apr 30, 2008
Secretary of State

Entity Name: HAITIAN ORGANIZATION NETWORK PLUS, INC

Current Principal Place of Business:

4410 NORTH MELTON AVE
TAMPA, FL 33614

New Principal Place of Business:

1912 E CRENSHAW STREET
TAMPA, FL 33610

Current Mailing Address:

4410 NORTH MELTON AVE
TAMPA, FL 33614

New Mailing Address:

1912 E CRENSHAW STREET
TAMPA, FL 33610

FEI Number: 20-8088106

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LONY, VIRGINIE J
4410 NORTH MELTON AVE
TAMPA, FL 33614 US

Name and Address of New Registered Agent:

LONY, VIRGINIE J
1912 E CRENSHAW STREET
TAMPA, FL 33610 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: VIRGINIE LONY

04/30/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LONY, VIRGINIE J
Address: 4410 NORTH MELTON AVE
City-St-Zip: TAMPA, FL 33614

Title: VP () Delete
Name: JEAN-LOUIS, EMMANUEL
Address: 162 SW SOUTH WAKEFIELD CIRCLE
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: SECR () Delete
Name: JEAN, NEROL
Address: 4410 NORTH MELTON AVE
City-St-Zip: TAMPA, FL 33614

Title: TR () Delete
Name: JEANNOT, SANDRA
Address: 442 W. COLUMBUS DRIVE
City-St-Zip: TAMPA, FL 33602

Title: AVD () Delete
Name: JULES, LENES
Address: 12527 TENSLEY CR
City-St-Zip: TAMPA, FL 33612

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LONY, VIRGINIE J
Address: 1912 E CRENSHAW STREET
City-St-Zip: TAMPA, FL 33610

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

Title: SECR (X) Change () Addition
Name: JEAN, NEROL
Address: 1912 E CRENSHAW STREET
City-St-Zip: TAMPA, FL 33610

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 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: VIRGINIE J LONY

P

04/30/2008

Electronic Signature of Signing Officer or Director

Date