

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19843

FILED
Mar 17, 2009
Secretary of State

Entity Name: FRENCH INTERNATIONAL PROGRAM ASSOCIATION, INC.

Current Principal Place of Business:

1200 ANASTASIA AVENUE., STE 300
CORAL GABLES, FL 33134

New Principal Place of Business:

1200 ANASTASIA AVENUE., STE 410
CORAL GABLES, FL 33134

Current Mailing Address:

P.O. BOX 430845
MIAMI, FL 332430845

New Mailing Address:

FEI Number: 59-2803334 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDELSTEIN, STEVEN A
1200 ANASTASIA AVE., SUITE 300
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

EDELSTEIN, STEVEN A
1200 ANASTASIA AVE., SUITE 410
CORAL GABLES, FL 33134 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

03/17/2009

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BERTRAND, LECOCQ
Address: 13200 SW 59TH AVE
City-St-Zip: MIAMI, FL 33156

Title: DS () Delete
Name: EDELSTEIN, STEVEN A
Address: 1200 ANASTASIA AVENUE., STE 300
City-St-Zip: CORAL GABLES, FL 33134

Title: DT () Delete
Name: SIMONI, JEANETTE
Address: 445 VITTORIO AVE
City-St-Zip: CORAL GABLES, FL 33146

Title: DT () Delete
Name: ESKRA, HANA
Address: 6321 SW 35TH ST
City-St-Zip: MIAMI, FL 33155

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: DT (X) Change () Addition
Name: FREILICH, VALERIE
Address: 4110 BATTERSEA RD
City-St-Zip: MIAMI, FL 33133

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: JEANETTE SIMONI

Electronic Signature of Signing Officer or Director

DT

03/17/2009

Date