2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 20, 2004
Secretary of State

DOCUMENT# N98000001462

Entity Name: HAITIAN-AMERICAN SOCIAL SERVICES COUNCIL, INC.

Current Principal Place of Business:

307 S DIXIE HWY
LAKE WORTH, FL 33460

New Principal Place of Business:

425 CRESENT DRIVE
LAKE PARK, FL 33403

Current Mailing Address:

307 S DIXIE HWY
LAKE WORTH, FL 33460

New Mailing Address:

425 CRESENT DRIVE
LAKE PARK, FL 33403

FEI Number: 65-0845147 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FINLEY, CHANDLER R
1645 PALM BEACH LAKES BLVD
#460
WEST PALM BEACH, FL 33401 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: D ( ) Delete
Name: FRANCOIS, JEAN
Address: 380 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10017

Title: D ( ) Delete
Name: FINLEY, CHANDLER R
Address: 1645 PALM BEACH LAKES BLVD #520
City-St-Zip: WEST PALM BEACH, FL 33401

Title: DP ( ) Delete
Name: ROC-MYRTHIL, ARNELLE
Address: 6577 SPRING MEADOW DRIVE
City-St-Zip: LAKE WORTH, FL 33463

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: FRANCOIS, JEAN
Address: 425 CRESENT DRIVE
City-St-Zip: LAKE PARK, FL 33403

Title: D (X) Change ( ) Addition
Name: FINLEY, CHANDLER R
Address: 1645 PALM BEACH LAKES BLVD #460
City-St-Zip: WEST PALM BEACH, FL 33401

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 Section 119.07(3)(i), 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: CHANDLER R. FINLEY DIR 07/20/2004

Electronic Signature of Signing Officer or Director — Date