

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005460

**FILED**  
**Apr 27, 2010**  
**Secretary of State**

**Entity Name:** HAITIAN-AMERICAN STUDENTS' & PARENTS' ASSOCIATION, INC.

**Current Principal Place of Business:**

14645 NW 77 AVE, SUITE 201  
MIAMI LAKES, FL 33014

**New Principal Place of Business:**

**Current Mailing Address:**

14645 NW 77 AVE, SUITE 201  
MIAMI LAKES, FL 33014

**New Mailing Address:**

**FEI Number:** 65-0998688

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JEAN-PHILLIPE, MARIE L  
1405 NW 167TH ST, SUITE 100  
MIAMI, FL 33169 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: ST  
Name: LUNDY, HANDEL  
Address: 2024 SW 173 AVENUE  
City-St-Zip: MIRAMAR, FL 33029

Title: PD  
Name: JEAN-PHILLIPE, MARIE L  
Address: 14645 SW 107 AVENUE  
City-St-Zip: MIAMI, FL 33157

Title: 1VP  
Name: STEPHEN, SUZIE M  
Address: 14735 N SPUR DRIVE  
City-St-Zip: MIAMI, FL 33161

Title: 2SD  
Name: OSORIO-CAMPBELL, BERTHA  
Address: 20452 NW 18 AVENUE  
City-St-Zip: MIAMI GARDENS, FL 33056

Title: 2VP  
Name: BROWN, PATRICIA  
Address: 625 NE 166 STREET APT 102  
City-St-Zip: N MIAMI BEACH, FL 33162

I hereby 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 all other like empowered.

SIGNATURE: MARIE JEAN-PHILIPPE

PD

04/27/2010

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

\_\_\_\_\_  
Date