

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004979

FILED  
May 01, 2009  
Secretary of State

**Entity Name:** HAITIAN BAPTIST EMMAUS OF FT. PIERCE, INC.

**Current Principal Place of Business:**

1205 ORANGE AVE  
FT PIERCE, FL 34954 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 124  
FT. PIERCE, FL 34956 US

**New Mailing Address:**

**FEI Number:** 65-0578408 **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:**

TATTEGRAIN, RAYMOND  
2804 FAIRWAY DRIVE  
FT. PIERCE, FL 34982 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: TATTEGRAIN, RAYMOND  
Address: 2804 FAIRWAY DR  
City-St-Zip: FORT PIERCE, FL 34982

Title: D ( ) Delete  
Name: BOCICOT, ANTIONE  
Address: 1012 ORANGE AVE.  
City-St-Zip: FT. PIERCE, FL 34954

Title: D ( ) Delete  
Name: MONTANA, ANDRE  
Address: PO BOX 124  
City-St-Zip: FORT PIERCE, FL 34954

Title: D (X) Delete  
Name: PHILLIPS, DANIEL JR  
Address: PO BOX 124  
City-St-Zip: FORT PIERCE, FL 34954

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: D (X) Change ( ) Addition  
Name: BOSSICO, ANTOINE  
Address: 1205 ORANGE AVE  
City-St-Zip: FT. PIERCE, FL 34954

Title: D (X) Change ( ) Addition  
Name: REGNER, RICHARD  
Address: 1205 ORANGE AVE  
City-St-Zip: FORT PIERCE, FL 34954

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: RAYMOND TATTEGRAIN

D

05/01/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date