

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011254

Entity Name: HAITIAN MUSEUM OF ART AND CULTURE, INC.**Current Principal Place of Business:**2870 MIRELLA CT
8205
WINDERMERE, FL 34786**Current Mailing Address:**2870 MIRELLA CT
8205 207
WINDERMERE, FL 34786 US**FEI Number:** 13-4289998**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GUILLAUME, FREDERIC M
2870 MIRELLA CT
8205
WINDERMERE, FL 34786 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:** FREDERIC M GUILLAUME

04/29/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO
Name GUILLAUME, FREDERIC M
Address 2870 MIRELLA CT
8205
City-State-Zip: WINDERMERE FL 34786

Title DIRECTOR
Name MILORD, MARIA E
Address 2870 MIRELLA CT
8205
City-State-Zip: WINDERMERE FL 34786

Title DIRECTOR
Name PIERRE, PATRICK
Address 2870 MIRELLA CT
8205
City-State-Zip: WINDERMERE FL 34786

Title DIRECTOR
Name PELISSIER, JOEL CHARLES
Address 2870 MIRELLA CT
8205
City-State-Zip: WINDERMERE FL 34786

Title DIRECTOR
Name RAYMOND, YVROSE
Address 1613 AMARYLLIS CIRCLE
City-State-Zip: ORLANDO FL 32825

Title DIRECTOR
Name NICOLAS, HADASCHA
Address 2870 MIRELLA CT
8205
City-State-Zip: WINDERMERE FL 34786

Title DIRECTOR
Name BARTHOLE, EDOUARD THIERRY
Address 2870 MIRELLA CT
8205
City-State-Zip: WINDERMERE FL 34786

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: FREDERIC M GUILLAUME

CEO

04/29/2019

Electronic Signature of Signing Officer/Director Detail

Date