

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000003320

Entity Name: MINISTRY UNIVESAL FOR DEVELOPMENT HAITIAN
PROGRESS INC.**FILED**
Apr 30, 2015
Secretary of State
CC9325888039**Current Principal Place of Business:**6509 MAGELLAN CT
APT 101
SARASOTA, FL 34243**Current Mailing Address:**6509 MAGELLAN COURT
150
SARASOTA, FL 34243**FEI Number: 30-0534047****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**JEAN-CLAUDE, CASSEUS
6509 MAGELLAN COURT
105
SARASOTA, FL 34242 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_____
Date**Officer/Director Detail :**Title PD
Name JEAN-CLAUDE, CASSEUS
Address 6509 MAGELLAN
City-State-Zip: SARASOTA FL 34242Title SD
Name GIBSON, EULANDA
Address 4411 ROSSWOOD DR.
City-State-Zip: MEMPHIS TN 38128Title TD
Name LOUISE, CASSEUS M
Address 1680 55 AVE., CIRCLE E
City-State-Zip: BRADENTON FL 34203Title MM
Name NOELUS, ELIMA
Address 1520 15TH ST
City-State-Zip: BRADENTON FL 34243Title MM
Name DAZULMA, JUNETTE
Address 2633
City-State-Zip: SARASOTA FL 34243Title AST
Name LOUIS, DANIEL
Address 200 HANDCCOCK RD
City-State-Zip: SARASOTA FL 34207

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: JEAN -CLAUDE CASSEUS**PRESIDENT****04/30/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date